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COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

COMMISSION D'INQUETE
SUR L'USAGE DES DROGUES
A DES FINS NON MEDICALES

Fort Garry Hotel,
WINNIPEG, Manitoba,

November 12, 1970.

1 COMMISSION OF INQUIRY
2 INTO THE
3 NON-MEDICAL USE OF DRUGS

4 COMMISSION D'ENQUETE
5 SUR L'USAGE DES DROGUES
6 A DES FINS NON MEDICALES

7 BEFORE:

8 Gerald LeDain, Chairman,
9 Ian Campbell, Member,
10 Heinz Lehmann, M.D., Member,
11 James J. Moore, Executive Secretary,
12 Marie-Andree Bertrand, Member,
13 J. Peter Stein, Member.

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SECRETARY TO THE CHAIRMAN:

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Vivian Luscombe.

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Fort Garry Hotel
WINNIPEG, Manitoba
November 12, 1970.

1 --- Upon commencing at 10:00 a.m.

2 THE CHAIRMAN: Ladies and gentlemen,
3 I call this public hearing of the Commission of
4 Inquiry into the Non-Medical Use of Drugs to order.
5 I would like to introduce the members of the Commission
6 here today: On my far right, Dean Ian Campbell of
7 Montreal; on my immediate right, Dr. Heinz Lehmann
8 of Montreal; I am Gerald LeDain; on my left is James
9 Moore, Executive Secretary of the Commission; on
10 Mr. Moore's left is Professor Marie-Andrée Bertrand
11 of Montreal; and on Miss Bertrand's left is Peter
12 Stein of Vancouver.

13 Perhaps a brief word of introduction
14 recalling the terms of our appointment, the nature
15 of our task. We were appointed as the Commission of
16 Inquiry in May of last year with a two year mandate
17 and we were asked to look into three things, the
18 effects of non-medical use of certain drugs and
19 substances, psychotropic drugs and substances which
20 are mood-modifying ones; look into the extent and
21 patterns of such use in Canada, and finally, the
22 causes of such use; general and social significance,
23 trying to put it into perspective in terms of its
24 relationships with aspects of life today; and on the
25 basis of our findings to make recommendations to
26 our government as to what it can do alone, with other
27 levels of government, provincial or federal, and to
28 reduce the problems involved in such use.

29 We were required by our terms of
30 reference to make an interim report after a six month

1 period of inquiry, and we have made that report
2 and, as you probably know, it was tabled and made
3 public in June of this year. We are now in our last
4 schedule of public hearings, seeking reaction to our
5 report and generally, views and advice on the main
6 issues of our inquiry. We went into some matters
7 more fully in our interim report than into others.
8 We expect to make a fuller development of our
9 analysis of certain aspects, for example, treatment
10 and education, in our final report, and so we are
11 anxious to get the views of as many Canadians as
12 possible on these matters. Really what we are
13 seeking is a wise social policy in response to this
14 phenomenon. It consists of many standards and
15 measures of which law is but one. There is research,
16 communication, rehabilitation, and various other
17 initiatives of a personal and institutional nature
18 directed to the moving conditions which are conducive
19 to drug use.

20 Now, the public hearings, of course,
21 are only one of our means of inquiry. We have many
22 private hearings with individuals, expert and lay,
23 and we carry out research in various areas, but the
24 public hearings certainly give us an opportunity to
25 give those who attend an opportunity to exchange
26 views and they are very valuable to us as an
27 indication of the experience in a particular
28 community and the reactions to the situation in
29 the community. We are interested to know, as
30 much as we can, how drug use has changed; the patterns

1 of drug use may have changed since we were last
2 here; indeed, how attitudes may have changed, and
3 what community initiatives are being taken. So, it
4 is both reaction to the report and what you might
5 say an updating of our knowledge of the situation
6 here.

7 Now, our manner of proceeding is that
8 we hear scheduled submissions and at the end of each
9 there will be an opportunity for comment, discussion
10 of what is said, both by the members of the Commission
11 and by all other persons present, and we hope that
12 you will take advantage of this opportunity and give
13 us the benefit of your views. We have placed micro-
14 phones in the aisles and they may be far away in
15 some occasions, perhaps, but if it would be con-
16 venient, if you could use them. I wonder if it would
17 be possible to have one in the centre here. It might
18 be more convenient to the people who are present
19 because it is better if you use the microphones.

20 Now, I shall call on Mr. A. R. Simms,
21 President, and Mr. William Potoroka, Executive
22 Director of the Alcohol Education Service of Manitoba.

23 If you gentlemen would care to be
24 seated at the table here.

25 Mr. Simms.

26 MR. SIMMS: Mr. Chairman, members of
27 the Commission, ladies and gentlemen. I would like
28 to begin, first of all, by thanking you for this
29 opportunity, and Before we turn to our brief, the
30 Board of the Alcohol and Drug Education Service of

1 Manitoba sent a questionnaire to all members of the
2 Board with regard to recommendations and comments
3 appearing in Section 429-74 of your interim report
4 and out of a possible thirty-six returns we tabulated
5 the results of fifteen only, and I would like to call
6 on Mr. Potoroka to present the results. I have a
7 couple of extra copies here for members of the
8 Commission.

9 MR. POTOROKA: The report is that the
10 other returns will be coming in. Of those in, 15
11 out of 36, indicate a pattern, actually. The
12 questionnaire was based specifically on the various
13 recommendations in your Interim Report in regard to
14 the law and I am sorry we don't have more than we
15 have tabulated here.

16 Perhaps to save time, I will
17 assume that you know the item and I will give you
18 the return on it.

19 Number one, which has to do
20 with simple possession, fourteen agreed with your
21 recom-ensation and one was that it be disregarded.

22 THE CHAIRMAN: Fourteen is
23 the number?

24 MR. POTOROKA: Fourteen out of
25 the fifteen returns .

26 THE CHAIRMAN: Thank you.

27 MR. POTOROKA: Number 2, no one
28 should be imprisoned for simple possession, 13
29 agreed and 2 disagreed. One comment was that jail
30 may be necessary for repeaters.

No. 3, amendment to the Narcotic and the Food and Drug Act, 14 agreed with that recommendation and one disagreed.

No. 4, the part that refers to the section of the criminal code where imprisonment is involved, 13 agreed with your recommendation and two disagreed.

No. 5, the use discretion, 13 agreed with your recommendation, 1 disagreed, and 1 was uncertain.

And moving over to the second page, the simple possession of controlled drugs remain as now, 12 agreed, 1 disagreed and 1 is uncertain.

And No. 7, about amphetamines, etc., all agreed with your recommendation.

Then, No. 8 does not really arise. The Alcohol and Drug Addiction Research Foundation feels that more research must be done in this area.

pg. 7 follows.

1 The next one, fifteen agreed, fourteen
2 and one in the third, fourteen and one in the fourth,
3 and then near the bottom of the page, fourteen, and
4 it would have been fifteen, but somebody didn't
5 answer -- fourteen and -- there is nothing on
6 that side.

7 Then, at the very bottom of the page,
8 thirteen agreed, one disagreed and one, uncertain.

9 Then, we move over to Page 3.

10 I'm sorry, the audience is left somewhat in the dark --
11 Moratorium - thirteen agreed with your comment on
12 moratorium, that it is not practical, one disagrees
13 and one is uncertain. Then, "Remove Cannabis from
14 the Narcotic Control Act, twelve agreed and one
15 disagrees, and two were "other". The only way we
16 could do it. They felt, for instance,
17 as long as there was adequate control, all drugs
18 be under FDA, and found that there were twelve,
19 twelve and one, and two.

20 Eleven, under "Trafficking", this is
21 where the greatest range of split occurred. Five
22 agreed with your recommendation. Eight disagreed.
23 One is uncertain, and one said, "only in an immediate
24 sense, so, perhaps, that should move into the
25 "agreed" column, so perhaps it should be six, agreed,
26 eight, disagreed, and one is uncertain. That is
27 the only question where there is such a definite split.

28 Number twelve, nine agreed, two dis-
29 agreed and four, other, and this was the slip up of
30 our questionnaire. We did not have the "agreed",

1 "disagreed" in there, so thirteen of them wrote it
2 in and two just passed it by, so that was typical.

3 "Police Methods, eleven agreed with
4 your observation and recommendations, three disagreed
5 and one is uncertain.

6 Fourteen on the criminalization, eleven
7 agreed with your remark about the destruction of
8 records after a reasonable time, three disagreed and
9 one asked for further studies.

10 And then, fifteen, "Discretion to avoid
11 a Conviction in Certain Cases", fourteen agreed and
12 one disagreed.

13 And then, after we sent this out, we
14 sent a further questionnaire simply having to do with
15 the Vienna Protocol, which was coming up for dis-
16 cussion in January; we sent a little background
17 material from The Globe and Mail and from the Canadian
18 Press, and interesting enough some that did not
19 answer the full questionnaire contributed this so
20 we got eighteen returns and all eighteen said defer.
21 All eighteen said defer as against "sign now" or
22 "don't sign at all". Now, I don't imagine this
23 calls for any comment, but I would suggest that we
24 will complete this when further returns come in and
25 give you a better looking, easier to handle document.

26 THE CHAIRMAN: Mr. Potoroka, these were
27 sent to eighteen persons. Did I understand you to
28 say ---

29 MR. POTOROKA: No, to the whole Board.

30 THE CHAIRMAN: The whole Board.

1 MR. POTOROKA: The whole Board, of whom
2 twenty-four were present at the meeting where the
3 decision to poll the members was made on the basis
4 of the questionnaire and they all went out and we
5 depended upon a return by mail, and fifteen submitted
6 the full questionnaire, and then the additional
7 question went out separately on the "Protocol", and
8 eighteen communicated an answer on that. So, we will
9 be getting other returns. This was in a period of
10 ten days.

11 THE CHAIRMAN: Naturally, I am interested
12 in the composition of your Board, and, we won't
13 identify them necessarily by name, but how is your
14 Board drawn from the community. Can you give any
15 sense ---

16 MR. POTOROKA: In two ways. First of
17 all there is almost an equal balance between indi-
18 viduals who are chosen as individuals and others ^{who} come
19 as representing the Y.M.C.A., the Y.W.C.A., CRYPT,
20 several major denominations. We could give you
21 that ---

22 THE CHAIRMAN: Could you give us -- it
23 would be interesting. There are, partially,
24 representative institutions and then there are
25 individual members.

26 MR. POTOROKA: For instance, the
27 Manitoba Medical Association has a representative,
28 CRYPT is represented, and so on. I might say, of
29 the fifteen, at least eight indicated that they read
30 your interim report, in fact, our Board, when it was

1 said
2 discussed, they/it would be crazy to answer the
3 questionnaire without having read the report, so we
4 had a good sale of reports at that meeting.

5 THE CHAIRMAN: Thank you.

6 Would you like to proceed?

7 MR. SUMMERS: Yes. Mr. Chairman and
8 Members of the Commission, we are glad that you have
9 come back to Winnipeg for another round of public
10 hearings, and we are thankful for this opportunity
11 of appearing before you again. The Board of Alcohol
12 and Drug Education Service authorized the President
13 and the Executive Director to make a submission to
14 you at this time. It asked that the submission
15 comment on the Commission's interim report from the
16 perspective adopted in our first brief to the
17 Commission.

18 We come, then, to add a sequel to what
19 we said a year ago. Our major focus will be education,
20 and we are responding to some of the things said
21 about education in your interim report, notably
22 Section 427. This response is an expression of the
23 views of two members of the Board of Alcohol and
24 Drug Education Service which delegated them to make
25 this submission.

26 General Estimate of the Interim Report:
27 Your interim report is a significant social document.
28 We commend you for giving the people of Canada an
29 outstanding treasury of information and data on
30 non-medical drug use, of ordered thinking and of
31 suggested social policy. We are familiar with the

1 comments of the Addiction Research Foundation of
2 Ontario on the interim report and we say in the words
3 of the opening sentence of those comments that our
4 "overall reaction is a favourable one". On occasion
5 we have referred to the report as "a Canadian Bible
6 on drugs", which phrase notes our respect for the
7 report's quality of authority. We stop short of
8 claiming verbal inspiration and special revelation
9 on behalf of the Commission.

10 We have recommended the report near
11 and far to others as a primary source for alcohol
12 and drug education today. We have sold or distributed
13 nearly one hundred copies. A number of our Board
14 members have purchased it. Recently our Board
15 appointed a special committee on the LeDain Commission,
16 and we expect that the committee will be making
17 comments on the interim report and the final report.
18 We have reprinted two short parts of the report,
19 some sections on information and education and the
20 tables of estimates of drug use among youth. We
21 have informed departments of the provincial govern-
22 ment concerning the importance we attach to the work
23 of the Commission and to the role of the provincial
24 government in formulating policies enlightened by
25 the Commission's findings and recommendations.

26 MR. POTOROKA: Section 425 of the
27 report, which deals with the problems in the dis-
28 semination of drug information. What you say in
29 this section about such lacks as "timeliness of
30 information" and "credibility" needs to be said, but

1 we think that you should expand the treatment. Such
2 lacks are, after all, characteristic of the dissemina-
3 tion of information in most realms. We still see but
4 in part and know but in part. The day we have all
5 of the information that is needed or possible, and
6 there is no problem of credibility, that day will be
7 The Perfect Day.

8 You state in this section that, "There
9 is evidence that young people lack confidence in
10 certain sources of information." This kind of insight
11 has been known to us over a period of many years as
12 we have sought to give leadership in alcohol education
13 and more recently in alcohol and drug education.
14 Confidence is something achieved rather than just
15 assumed. Confidence is a two-way-street for young
16 people and for people whom the young people do not
17 think of as young people. We believe that both
18 groups have to make costly efforts to listen, to
19 allow, and to trust on this street. Pride, which is
20 no respecter of age, helps to create credibility gaps
21 as much as does misinformation and ignorance.
22 Experience, which is not to be confused with experi-
23 mentation, has something to do with credibility.
24 Lack of experience, or not having lived long enough
25 or deeply enough, has its own way of trapping persons
26 into not paying attention and not believing.

27 From time to time we have observed that
28 certain people may have credibility with others but
29 that this credibility is no guarantee of the exchange
30 of correct information or valid insight. You may wish

1 in your next report to take up the question of who
2 is credible to whom and under what circumstances and
3 about what. It occurs to us that the reason the
4 educator breaks up the larger mass of people into
5 smaller target groups for information has a good deal
6 to do with the achievement of credibility.

7 The phenomenon of credibility is a
8 subtle, mysterious, tender and living force. Credi-
9 bility depends on much more than researched data and
10 objective facts. And here we refer you to a footnote
11 to Gunnar Myrdal's set of lectures on Objectivity in
12 Social Research, and we recommend his study to the
13 Commission. When the media of information and
14 understanding are persons presenting themselves to
15 your eye and person, and when in the exchange we take
16 the risk of human beings really relating to one
17 another, this is scarcely the nicely controllable
18 situation of two computers at work. Where people
19 are there are always imponderables, the unexpected.
20 And I use this as an illustration. It is one thing
21 for the writer of the preceding lines to write them
22 in his study as reading material for members of the
23 Commission. It becomes in part something else when
24 what he has written is presented by him in person
25 before the members of the Commission. And should
26 what he has written be presented through another
27 person this becomes something else again.

28 We know of persons in their early teens
29 who declare to you that they know all about drugs,
30 and that so and so doctor, psychiatrist, teacher and

1 even members of the LeDain Commission can't teach
2 them anything here. To be sure, such persons come
3 in all age brackets! They are a reminder that the
4 dimensions of credibility go far beyond the flawless
5 operations of a research laboratory, the intellectual
6 integrity of a writer of educational materials, and
7 the fine methodologies of a skilled teacher.

8 We hope that in its final report the
9 Commission will expand its comments and reflections
10 on problems having to do with the dissemination of
11 information.

12 In Section 427, Drug Education. This
13 section, covering not quite two pages in the interim
14 report, touches upon many strands of the search for
15 meaning by education. In many parts of the report
16 there are observations, both direct and indirect,
17 which shed light on the subject and processes of
18 education. We are thankful for these observations;
19 they are incisive and helpful, and they lend to the
20 interim report what the Addiction Research Foundation's
21 comments call "its philosophical scope of balance."
22 But our point now is to give a critique of Section 427
23 in the light of many years of experience in the field
24 of alcohol and drug education. We want you to have
25 the thrust of our response to this section which is
26 your declaration of what drug education is all about.
27 We want to strike some notes which appear to us to
28 be missing from this section. As we proceed in our
29 elaboration you may be tempted to think that we are
30 trying to score some debating points. We do not think

1 this to be our purpose. As a matter of fact, if I
2 felt that to be my purpose, I would not be coming to
3 this Commission this morning.

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 We hope that we will be able to start a
dialogue with you and among yourselves about something
that represents to us the very spirit of education
and life.

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 This section, as much as and even more
than any other section or sections of the interim
report, suggests to us what your Commission as a
truth-seeking body is up against, and also what those
who read your report as a truth-seeking people are
up against in the report, in the Commission, and in
life.

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 Like the play Hamlet, Section 427 abounds
with quotable passages the study of which shows that
people don't start from the same place or viewpoint;
which means that where we do start has a lot to do
with what we find. The substance of Section 427 is
not factual data verified objectively by scientific
standards. Rather it has to do with the what, how
and why of human beings as they go about the business
of living, which involves something more than data
acceptable to, and accessible to, the scientifically
oriented, objectivity-loving inquirer. As we read
Section 427 we see you presenting parts of the
rudiments of a philosophy of education and of life.

1 Your remarks arise from certain valuations, as Gunnar
2 Myrdal calls them, precious and fundamental to you.
3 You are disclosing your stance in the arena of life.
4 Therefore, the question comes to us, how does this
5 stance of the Commission recognize, present and
6 consider other stances found in the arena of life
7 today?

8 Fine as this section is, we have to
9 observe that for us the subject calls for a great
10 deal of expansion and clarification. There is more
11 we feel to "telling it as it is" than the section
12 tells. Within less than two pages you invite us to
13 ponder an array of what we shall call impressive
14 understandings. We are now going to list some of
15 these understandings and we are going to give you the
16 feeling-question-thought response that came to us as
17 we tried to take in what we perceived you to be
18 saying.

19 Now, here, the audience will be at a
20 disadvantage because we are giving a quotation and
21 then we are giving a comment. The quotation then:
22 "...the whole truth be told as far as humanly possible..."
23 The comment, Great! The biggest order and the finest
24 aspiration in the entire report; as such it is un-
25 equally realized. Quotation: "education about drugs
26 will be ineffectual unless moralizing and patronizing
27 attitudes are changed...". Not sure what statement
28 entails, nor who must change in what and why. State-
29 ment as it stands could be a moralizing and patroni-
30 zing one in itself.

1 Three, quote: "... the basis for informed
2 and wise personal choice.." Comment: This basis is
3 as old as the Garden of Eden with its confrontation
4 and choices.

5 Quote: "...reasonable control and even
6 overall reduction in the non-medical use of drugs..".

7 Comment: The whole report considered this may be
8 far more the ideal solution than something actually
9 attained if experience in liquor control is taken
10 as the model.

11 Quotation: "...unlikely to be achieved
12 by exhortation or propaganda.." Comment: Again we're
13 back in the Garden of Eden, seeing why these methods
14 are with us and socially acceptable and viable.

15 "Helping people to see where their
16 real personal interest lies in the long run." Comment:
17 Text for a thousand plus sermons today and tomorrow
18 but not necessarily by clergy or in religious
19 establishment pulpits.

20 Quote: "...a realistic view of human
21 motivations.." Comment: Whose realism about whose
22 kind of humanity, with what kind of motivation?

23 Mr. Chairman, we are not trying to be
24 clever. We are not. We are just raising -- I
25 personally am grounded, somewhat very poorly, in
26 existential theology. And I feel that always behind
27 a comment, there is a deeper question. What we have
28 tried to do here -- forgive the blundering -- is try
29 to say that your fine comments/^{raise} further questions.
30 Perhaps we can leave it at that. And then may I --

1 and then, of course, there are two footnotes here
2 indicating one book, "The Flight from Woman", by
3 the eminent psychiatrist Karl Stern, which is well-
4 worthy, and the other is "Existential Thinking" by
5 the well known, in the United States, theologian,
6 Bernard J. Boelen. Oh, pardon me, there are two
7 more -- quotation: "...we can no longer rely on the
8 appeal to a sense of morality.." Comment: This
9 surely is not what the Commission meant to say.
10 If it is, to what then in the interim report
11 appealing?

12 And then, finally, "...vitality, self-
13 development and self-realization.." And this is
14 the line of questioning that I get from the late,
15 great theologian, whom I -- in which he says
16 "Why be vital? Why be self-developed? Why be self-
17 realized? And, what self in what kind of society?"

18 Mr. Chairman and members of the
19 Commission, our sole purpose in this discussion
20 of Section 427 is to ask you to go more deeply
21 into the question of education, balancing the
22 knowledge that man gains by scientific inquiry with
23 the knowledge that comes to us through wisdom or
24 intuition. This is our way of asking you, in the
25 words of the Addiction Research Foundation comment
26 to "make perfectly clear the issues which must be
27 decided" -- which we take to include a careful
28 description of all of the elements that enter into
29 decision-making. This is our way of underscoring
30 another strong point made by the Addiction Research

1 Foundation, namely the statement that such a
2 treatment of the issues "would put the discussion
3 in terms of value judgments which the public at
4 large must ultimately make".

5 Some months ago we participated in
6 a study committee made up of representatives from
7 about twenty-five agencies in Metropolitan Winnipeg
8 brought together by the Welfare Planning Council
9 to look at the matter of youth and drugs in our
10 community. It may be that the report of this study
11 has found its way to the Commission. The committee
12 examined in some detail the need for a drop-in
13 centre concerned with counselling, treatment,
14 research and education. One of the points made
15 in the committee's report was that presentation
16 of information should occur "in a context of
17 human development and growth so that in this way
18 attention be given to how personal values and
19 ethics influence one's views and opinions about
20 drugs. Where there is a discrepancy of opinions
21 and/or interpretation all must be 'clearly arti-
22 culated and differentiated.'"

23 Now, I would just add one thing, and
24 that is that many of the things that have been said
25 in this section and said not too well are, perhaps,
26 said much better and much more briefly by Dr. Joel
27 La Forte in his book, "The Pleasure Seekers", which
28 I think was published after you launched into the
29 writing of your interim report, and I recommend
30 that to you.

1 MR. SIMMS: We wish to complete this
2 submission on the same note that brought our first
3 submission to a close. We believe that your efforts
4 to date have been motivated and marked by a spirit
5 of excellence. We are confident that as you
6 complete your demanding and difficult task that
7 your final report will illumine more pathways to
8 excellence open to the Canadian people.

9 We hope that both the interim report
10 and the final report will help us all to heed the
11 words of John W. Gardner in his book called
12 "Excellence":

13 "Free men...must cherish what
14 Whitehead called 'the habitual
15 vision of greatness!' If they have
16 the wisdom and courage to demand much
17 of themselves, as individuals and as
18 a society, they must look forward to
19 long-continued vitality. But a free
20 society that is passive, inert and
21 preoccupied with its own diversion
22 and comforts will not last long.
23 And freedom will not save it."

24 Respectfully submitted.

25 THE CHAIRMAN: Thank you, very much,
26 gentlemen.

27 Well, this submission focuses in on
28 one of our major commissions in this final year, and
29 certainly gives thoughtful reaction to the report,
30 but it also focuses particularly on the whole question

1 of drug education which we certainly commented upon,
2 briefly, in the interim report. An attempt there was
3 made to disclose our general perspective, I guess, at
4 that time; some of our assumptions. But we certainly
5 know it is one of the most difficult and critical
6 areas for clarification of objectives on this subject
7 and we welcome the opportunity to have the benefit
8 of your views and to have a searching discussion of
9 those questions.

10 The question we ask repeatedly, one of
11 the first questions we ask repeatedly, is "What should
12 be the objective of drug education?" And in the
13 first phase of our inquiry we asked more particularly,
14 "Should one try to convey the whole truth as well
15 as one can?" As you likely observed it is an illusory
16 goal, and we acknowledge our own difficulties and
17 imperfections in trying to attain it. But we ask that
18 question because we have got a pretty strong -- I
19 would not say unanimous answer -- but overwhelming
20 majority, of an answer that we should convey to the
21 best of our ability all the information including
22 positive as well as negative; positive as well as
23 negative aspects; pieces of information. But then,
24 the next question was to what should be -- is the
25 object simply to convey the information? Is there
26 some other object? We would welcome your views on
27 that. What do you feel is the object of drug
28 education? I think we said that we think its object
29 should be to put people in the position to make
30 wise personal choices, and I suppose that implies a

1 great deal; the capacity to make the choice and so on.
2 Then we have suggested what we would hope would be
3 the ultimate effects but we have not gone much beyond
4 that. We recognize that. What do you feel should
5 be the object?

6 MR. POTOROKA: I think what we are
7 trying to do in this presentation, in terms of
8 trying to deal with the kinds of comments and questions
9 you are now posing, is, first of all, to suggest that
10 in the giving of the information -- and we agree that
11 if it is the case of data, ^{for instance,} then everything must be
12 given. But we are suggesting that as well as what
13 might be called the basic scientific information,
14 there is other information that has to do with
15 attitudes, the quality of one's values or what one
16 is learning to treasure ~~as~~ a value that enters into
17 that. And from our experience, and I have been
18 in this work eighteen years, it seems to me that
19 this is the part that must not be lost sight of
20 because it is the easiest thing in the world to
21 set up a program where you give, for instance, all
22 the facts. We would take the first part of your
23 report, the two hundred pages about the drugs, and
24 that is all that we'd do. That is all we know. So
25 from there on, you are on your own.

26 Somehow we feel that that is not the
27 way we live when we make choices, and we should not
28 suggest to people that that is the way they really
29 make choices, because it is a fundamental question of,
30

1 I suppose, philosophy we are raising and it is an
2 awful thing to ask you really, to come forward.
3 All we are asking is, delve into it a little bit more
4 deeply.

5 THE CHAIRMAN: We have to.

6 MR. POTOROKA: Once this is done, there
7 is a balance of information that is objective and
8 could be verified in the books and elsewhere. There
9 is this other part that has to do with living and
10 certain goals and directions. We are not saying
11 that the goals should be based upon one person's
12 preferences of goals and direction because there
13 are options. So one has to be very careful how
14 one raises that.

15 DR. LEHMANN: May I ask you a question
16 to clarify what you are saying, specifically: the
17 one who is to do the educating would, I assume, have
18 all the so-called objective information available.
19 Now, he, in the educational process would present it
20 to others to be informed and you find out that the
21 attitude is acceptual. But now, there is two ways
22 in which his attitude could come through: one, that
23 the whole presentation will be programmed in such
24 a way that a certain attitude is almost certain to
25 be chosen beforehand by the educator, is to be
26 implemented or is to be created in the one who learns.
27 Or one could simply say, "well, I will tell you about
28 that. My own position is 'such and such. I do not
29 like taking drugs. I do not think people should."
30 Or they might make their own choice or whatever it is.

1 Now, "now that you know my attitude,
2 I will give you the facts as they are."

3 Now, my specific question, then: would
4 you feel that it is better to have this attitude
5 made clear to the listener or should the whole
6 presentation be shaped in such a way that a
7 certain attitude is to be created?

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1 MR. POTOROKA: No, I think I would
2 leave it a little more open than that. I think the
3 options and attitudes have to be left open. For
4 instance, let me illustrate it in a more simple way --
5 if we focused on alcohol as the problem. One
6 should indicate what range of people one is dealing
7 with. One might be dealing with children from ten
8 years up, the young people, to their parents and to
9 older people and this presents targets. So someone
10 would say to us, let us say a twelve year old, "Do
11 you drink, Mr. Potoroka?", you see. And I would say,
12 and I still do, except in a personal discussion; I
13 say, "Look, that is an irrelevant question, really."
14 And then I seek to do three things in terms of
15 attitude: indicate to the youngsters that the large
16 number of Canadians see certain values in drinking
17 which leads them to use alcohol, so that there is
18 a position. There is ^{also} a moderate section, where,
19 for his own consideration of values, he chooses to
20 abstain, and then there is an uncertain group, that
21 is not too certain. This way, I think we cover the
22 whole range of possible attitudes with the exception
23 that we have not included the people who have sick
24 attitudes to drinking and become alcoholics.

25 Well, similarly, one has to do the
26 same thing with drugs, that is, indicate that we
27 are in a pluralistic society, so the influence of
28 one's home, one's church, one's friends, the people
29 who really mean something to him, will contribute
30 to his attitude. And I am not one to say you should

1 be in this or that. We have to be fair. One of the
2 hardest things for an educator, who has the great
3 privilege of meeting all sorts of youngsters, is not
4 only to be fair to them but to be fair to their
5 parents, and so on. So that in the discussion you
6 cannot use the classroom to undermine the home or
7 vice versa, you see. But this is a very delicate
8 and difficult operation. I'm arguing for a pluralistic
9 approach, you see. I abominate having to declare
10 myself personally, you see, for the simple reason --
11 I think it comes out, you know. But I don't want
12 to be in the position where I am recommending my
13 solution, admirable as I may think that it is, to
14 a particular person. In a one to one situation,
15 when he asks me as a person, then I tell him and
16 we talk, but with a group of twenty or thirty ---

17 DR. LEHMANN: Is it not a danger that with
18 this pluralistic tolerance, something similar takes
19 place/^{as}if all the information is presented "objectively"?
20 In other words, it is not really the way in which
21 people do learn that they are being told, "Well,
22 you are coming from such and such a home, and
23 therefore you might be inclined to drink, while
24 others come from other homes and might not be
25 inclined to drink." Well, then, he still does not
26 know what he himself is supposed to do.

27 MR. POTOROKA: Let me illustrate in
28 my own experience. I recently wrote a letter to
29 a retired gentleman of eighty, in Victoria. He had
30 sent a contribution to our organization. Why did I

1 write the letter? I was a boy of ten in Winnipeg
2 when he was my Sunday School teacher. I am Ukranian.
3 I'm well acquainted with the drinking habits of the
4 Ukranians. My dad used to have a party with his
5 friends and kill a quarter -- you know, take a beer
6 every Saturday night. But I remember this gentleman
7 because he said something in a temperance lesson
8 about health and the effects of alcohol, which I was
9 able to match with what I observed. But he never
10 said anything in judgment of my parents. And this
11 has been a focal point of my education, to me. I mean
12 there were other things to influence you. I was
13 discouraged to brush my teeth. I had to brush my
14 teeth surreptitiously at home. I would be made fun
15 of by my parents, but I would think my teachers
16 were smarter than my parents in that case and I would
17 brush my teeth faithfully.

18 There are things that one has to
19 delicately respect in the person, and I feel that
20 in this case, Mr. Lord -- I will name him -- did this
21 in that particular case. Maybe it does not work
22 that often, but this is what we are pleading for.
23 Maybe we are idealists too.

24 PROFESSOR BERTRAND: May I ask you to
25 clarify for me some of your statements on page 4 of
26 your brief. In paragraph 9, you say, "We know of
27 persons in their early teens who declare to you
28 that they know all about drugs, and that so and so
29 doctor, psychiatrist, teacher and even members of
30 the LeDain Commission can't teach them anything here.

1 They are a reminder that the dimensions of credibility
2 go far beyond the flawless operations of a research
3 laboratory, the intellectual integrity of a writer
4 of education materials, and the fine methodologies
5 of a skilled teacher." What is credibility for you,
6 and what would be -- what would there be beyond those
7 three things?

8 MR. POTOROKA: What I am trying to say,
9 at a particular time, in a particular life, or lives,
10 a person just says to other people, "Look, I can't
11 believe. I'm not prepared to believe."

12 PROFESSOR BERTRAND: Prepared to believe
13 you or ---

14 MR. POTOROKA: Yes, prepared to believe.
15 It may be a pastor, it may be a teacher; it may be
16 anyone. And some people retain this quality right
17 through life. They become fixated and often --
18 I refer somewhere to pride, because in my view, pride
19 is one of the most tremendously effective freeing
20 things in life. And I'm not only speaking of myself
21 but there is close to me ---

22 PROFESSOR BERTRAND: So what is
23 credibility to you?

24 MR. POTOROKA: Credibility to me is
25 to accept that someone else does know something that
26 I don't know and I'm willing to find out.

27 THE CHAIRMAN: Is it tolerance, basi-
28 cally? Is it an attitude rather than ---

29 MR. POTOROKA: Well, I suppose tolerance
30 does enter -- I am referring -- just recently I have

1 been in touch with certain classes, you know, good
2 kids. But really, they are at an age where this is
3 the way -- if you turn them loose in a group dis-
4 cussion, all they want to do is listen to themselves
5 and no person older can possibly know anything. Now,
6 I think they are going to get over it, but all I am
7 saying is that this thing can characterize life
8 generally.

9 THE CHAIRMAN: In other words, we may
10 have exaggerated -- excuse me -- we may be placing
11 too much stress at times on this idea of credibility,
12 exaggerating the lack of credibility or what ought
13 to -- minimizing what ought to be the credibility
14 of some other sources; that it can be an abused
15 concept. Do I get that sense ---

16 PROFESSOR BERTRAND: I must say that
17 for me credibility is something else.

18 MR. POTOROKA: I wonder if you might
19 say what you think I was saying.

20 PROFESSOR BERTRAND: I was looking for
21 what you thought there was -- there is, beyond the
22 knowledge of the laboratory researcher. What is
23 there beyond that that would grant -- serve as a
24 basis for credibility?

25 MR. POTOROKA: It's this kind of thing,
26 and this may be -- I can only speak for myself. Here
27 I read the book, "The Pleasure Seekers", by Dr. Joel
28 La Forte. I don't know the man, I've never seen his
29 picture. I just like the way he writes. I mean,
30 he just comes through. And I'm sure, were he to come

1 here within a hundred miles, I would go to hear
2 him because I feel that he has a contribution to
3 make. And I don't think that necessarily I would
4 leave my critical faculties at home and I would
5 travel a hundred miles. There is this thing that
6 I turned a little poetic when I tried to describe it.
7 I think it's fair. Some people are, just the way
8 they present themselves to you, certain barriers
9 are drawn. Others, you know, you haven't heard
10 them. They may have even a better story to tell
11 than the first fellow, but you are frozen and you
12 don't listen to them.

13 DR. LEHMANN: Is it an objective factor
14 then, that is bound in the personality?

15 MR. POTOROKA: Oh, I'm sure it's far
16 more subjective, you see.

17 PROFESSOR BERTRAND: On the part of the
18 receiver or the giver?

19 MR. POTOROKA: I think in this context
20 I was suggesting more on the part of the receiver.
21 But now that you have mentioned it, I do feel that
22 there is an onus on the part of the one who is
23 sending it too, you know -- I suppose that's why one
24 talks about being too "in". I suppose they are both
25 on the same length of, you know, back and forth
26 movement, as it were, of communication.

27 DR. LEHMANN: With this dynamic to and
28 fro movement then, how is one to screen for good
29 educators, how is one to screen for audiences?

30 MR. POTOROKA: How you ask it, really --

1 | you are asking me how to win friends and influence
2 | people. You are asking me how I could lose my friends
3 | and ---

4 | DR. LEHMANN: It's not entirely a
5 | rhetorical question.

6 | MR. POTOROKA: No, it isn't. There are
7 | no teachers present here. There are teachers I know
8 | who could possibly do a job here and who are being
9 | asked to do a job here. First of all, they don't
10 | have enough sense of discipline and study to make
11 | sure of their material. And secondly, they are really
12 | not sure of their purpose. And I have made myself
13 | very unpopular with a number of teachers by raising
14 | the question: "Look, know first of all, what you are
15 | trying to do. Be clear about this. Sort of, so that
16 | you can do without any hang-ups, so that you will
17 | come across, you know, not as a phony but someone
18 | that the kids will respect." But it's a very difficult
19 | one and maybe we have to screen -- better that the
20 | teacher should say, "Look, I don't think I can do it."
21 | Or he says that and then says, "I don't think I can
22 | do it, but Gee, I'm going to try hard in both the
23 | information and attitude." But a lot of effort is
24 | being done on minimal equipment, factually and
25 | this is what I call the spirit that will make for
26 | credibility.

27 | THE CHAIRMAN: There is a gentleman
28 | at the microphone.

29 | THE PUBLIC: I am still a little bit
30 | unclear about the point you are trying to make. I

1 wonder if we are agreed that values is part of
2 education. Would you be prepared to accept this kind
3 of statement representing what you are trying to say,
4 that it is necessary for the person who is doing the
5 educating to be firstly honest, and secondly, willing
6 to become closely involved with the person he
7 is educating.

8 MR. POTOROKA: You are being very
9 helpful, Paul, and I happen to agree with you all
10 along the line.

11 THE CHAIRMAN: Another gentleman at
12 the microphone.

13 THE PUBLIC: It seems to me that when
14 we are talking about the qualifications of a person
15 who is going to present certain material and you were
16 talking, I presume, about drug education and alcohol
17 education as well. I think we are essentially talking
18 about the personality of the person who is going
19 to present the material; -also, the kind of "image",
20 if you will, that that person represents to the
21 person who is going to hear him

22 For example, I think it is quite true
23 that if a Police Officer is going to present material,
24 that Officer represents a certain image and unfortunately,
25 at the present time, his image is automatically a
26 negative one to the person who is going to hear him.
27 Unless he has got an awfully fantastic personality,
28 I think he is going to have trouble communicating.
29 Someone else who represents a more neutral image,
30 however, who has a personality that might be

1 characterized by openness, by honesty, by concern for
2 other people who are going to listen to him and as
3 well has a body of knowledge and facts in store for
4 use, I think that person, then, is going to be
5 an effective communicator.

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1 I think that the personality of the
2 person is the key factor that is even more important,
3 perhaps, than how broad or how wide a basic knowledge
4 the person may have. The personality is the primary
5 requisite, knowledge can come after.

6 MR. POTOROKA: Mr. Chairman, I would
7 agree with that, but I would have to add one thing,
8 and that is that we have got to strive for a climate,
9 you know, in which, "Okay, we'll really try hard",
10 you know, "and listen to the policeman. He may not
11 be that far off, you know. After all he is a human
12 being and in some ways -- get the humanity behind him,
13 and, you know, take all he says. I mean, this is a
14 part. We have got to deal with one another, and if
15 we sort of raise the level of our accepting one
16 another, and not, of course, leave our critical
17 faculties somewhere else, I think there is a gain
18 there. So that this does not become a PR effort when
19 people are trained to appear in a certain way and to
20 use, you know, master techniques far deeper than that.

21 In other words, a person who hasn't
22 got beauty physically and has been so spoiled,
23 perhaps she can tell us, perhaps if we really listen
24 to such a person, she can tell us about the real
25 meaning of beauty, when we get below the surface,
26 you know. For many of us, it's hard for us to make
27 that -- to accept the person who doesn't appear
28 beautiful might have very beautiful thoughts with
29 a very beautiful understanding of life and so on.

30 And I think at this point -- I'm pleading

1 for that too, you know. But this is a part.

2 THE CHAIRMAN: Lady at the microphone?

3 THE PUBLIC: Mr. Potoroka, I hate to
4 follow what you just said, but I really would like
5 to expand on what the other gentleman said. He said
6 something about the police discussing with a group
7 of people, and I understood from what he said that
8 that group would be teenage or older. I hate to see
9 this discussion become involved in the personality of the
10 a person doing the educating without discussing the
11 age of the people involved. And I would also hate
12 to see this period of discussion get bogged down
13 and really come to nothing because there is nobody
14 who is qualified to teach it.

15 I think that children should be started
16 on drug education, abuse and use of drugs when they
17 are very young, you know, when they enter school.
18 And I have seen a discussion by a policeman with a
19 group of elementary students where there are no
20 barriers as far as their attitudes toward the police
21 are concerned. And where attitudes are very, very
22 important, I think that we must realize that this
23 information must somehow be started, rather than a
24 big harangue starting about who should do the teaching.
25 Someone has to do it, and not only for the children
26 but for parents to be educated as well.

27 THE CHAIRMAN: Gentleman at the micro-
28 phone?

29 THE PUBLIC: Madam, you have just
30 posed a very interesting problem for those who sit

1 down and believe that there is no age difference;
2 that you are only as young as you think, and that
3 it really doesn't matter whether you are ten years
4 older and give drug education or forty-five years
5 old and are given drug education. Because you have
6 to decide for yourself. ~~In reply to~~ Mr. Potoroka,
7 the only person that can tell me about the beauty
8 of life is myself. Other people can help me, other
9 people can give me clues, hints, thoughts, if they
10 want, and I will listen to them. The only person
11 who is ever going to decide whether life is beautiful
12 is me.

13 MR. POTOROKA: Well, I would like to
14 agree with you in part. I would like to see you on
15 a desert island seeking beauty and truth and everything.
16 I think you are underestimating your debt to others.
17 I think you grossly underestimate it.

18 I, for one, would declare an opposite
19 view of that. Just about all the things I can
20 call beautiful have come to me from others. I am
21 a debtor to everyone who has gone before, and
22 everyone around me. I think that represents a
23 far more realistic approach to people living.
24 Although there is a sense in words, in the final
25 analysis, truth as (Heidegarde) ~~said~~, has to be truth
26 to me. I accept that, if that's what he is trying
27 to say, then I agree with him. ~~To say~~ I will arrive at
28 truth, regardless of society and regardless of who
29 has gone before me, I am afraid it's going to be
30 a pretty poor truth that is arrived at. Even Socrates,
given no Grecian society around him, we wouldn't know him.

1 It is significant that he appeared with Plato at the time
they did appear.
2 / Then life was never more vital and there wasn't
3 more going on by people and they were in contact
4 with one another.

5 And I think that is one note that I
6 have tried in my education, to get across to people
7 like the last speaker, as kindly as I can, and it is
8 difficult to get across because somehow they think
9 "doing my thing" is just "me and my thing". And
10 I think if me, and you, and the other fellow, and
11 who has gone before you and who is after you, they
12 all have to do with my thing and yours.

13 THE CHAIRMAN: Dr. Lehmann?

14 DR. LEHMANN: There is one very crucial
15 comment, the last comment, the quotation in our
16 report, "Why be vital, why self-developed and why
17 self-realized? What self in what society? Why
18 should one say, why should there be progress, why
19 should there be consideration for others, why there
20 should be a society that is viable?" These are all
21 stands that are often expressed.

22 Now, how is one going to go about this?
23 Should one assume that these are values that are
24 self-evident, that we state our position that we
25 had these values or authenticity or freedom; a society
26 and progress and vitality being values, and therefore
27 make a subjective statement? And then how are we
28 going to convince people that these values should
29 be their values as well?

30 MR. POTOROKA: I think the matter is

1 that, perhaps, you can't. You can only testify, as
2 someone has said. And by the way, this set of
3 question derives from a symposium on hell. I will
4 give the title to the Commission. And in this
5 symposium, the brief was given by the German
6 theologian, Tillot, and this was the question, as
7 he discussed hell. he raised the fundamental
8 question of "why". And I think you are on the track,
9 Doctor, that somewhere along the line we declare
10 ourselves because for this, that and the other thing.

11 Now, everyone may not agree with us,
12 but we think that this, that and the other thing is
13 what has made society really vital, and great in
14 those periods when it has been more vital and great
15 than in other periods. But, we have to leave it at
16 that.

17 MR. CAMPBELL: Coming back to the
18 matter of, perhaps, harder facts about drugs, I am
19 much concerned with the effect of the brilliant,
20 credible, effective teacher of gross misinformation.
21 We commented in the report that we don't think, for
22 instance, scare tactics are good. On the other
23 hand, you hear people making statements that are
24 patently absurd, such as, "the only thing that causes
25 bad acid trips are the adulterants of acid. If people
26 only got pure acid there would be no bad trips."

27 What is the responsibility of those in
28 educational institutions to assure of the factual
29 competence of those people who will be involved in
30 teaching? Do you see any particular authorities who

1 should play, as it were, a certifying role?

2 MR. POTOROKA: I think, for instance;
3 let me use that illustration. Perhaps, from the time
4 that you were appointed, I anticipated that your
5 interim report would be a tremendous thing for the
6 educators in this field and I believe it. Let me
7 illustrate what happens though. I had a community
8 meeting where 140 adults were present, and there
9 must have been fifteen teachers there. I made a
10 plug for your report, I made a plug for your meeting
11 here today. I had ten copies of your report present.
12 And do you know, there was only one copy bought.
13 A lovely little old lady came to me afterwards with
14 a copy and she said, "You know, I want to read this.
15 Here is two dollars for it."

16 What I'm getting at is that if I had
17 been -- you see, I'm going to get in trouble -- I am
18 made for trouble my wife says -- if I had been --
19 and I am not -- the Minister of Youth and Education
20 in this province, I would have seen that come this
21 fall, in the directives to all my Health and Guidance
22 teachers, a strong -- no, I would have done better.
23 I would have put a copy of your report in the hand
24 of each one of those teachers with a strong appeal,
25 "Look, this is the source of basic information. This
26 will help to beef up what you are doing." I use
27 this as an illustration. It is a dangerous one
28 because if the press picks it up, the Honourable
29 Mr. Miller will not love me, but I am not here for
30 Mr. Miller to love me. There is a much greater

1 purpose at stake. This is not happening.

2 So, do you get it? That is the poetry,
3 and you can pick it up from there and play it on.

4 THE CHAIRMAN: Professor Bertrand?

5 PROFESSOR BERTRAND: It is a very small
6 question. I would only like to know if on page 3
7 your quote of Gunnar Myrdal extends to all the words
8 that are there, that if I'm right in thinking that
9 from the word, "facts" on, this is your own comment,
10 is it?

11 MR. POTOROKA: No, the footnote is all
12 his, and he is quoting himself.

13 PROFESSOR BERTRAND: This explains the
14 double quoting.

15 MR. POTOROKA: Yes, he has a habit of
16 quoting himself. Apparently, he often adds a preface
17 to one of his major studies in which he tells you
18 what he has been trying to do and how he has been
19 trying to deal with his presuppositions, so he is
20 quoting himself. That whole footnote is word for
21 word as it is in the book.

22 PROFESSOR BERTRAND: You are quite
23 sure about that? Because on lines 5 and 6, I don't
24 think the words, "no scientific facts" are his.

25 MR. POTOROKA: I have the book here.
26 May I -- I would be glad to -- .

27 I will read the book now. "This
28 implicit belief in the existence of a body of
29 scientific knowledge acquired independently of all
30 valuations I soon found out to be naive empiricism.

1 Beginning of quoting himself: "Facts do not organize
2 themselves into concepts and theories just by being
3 looked at; indeed, except within the framework of
4 concepts and theories, there are no scientific facts
5 but only chaos."

6 PROFESSOR BERTRAND: Thank you very much.

7 MR. POTOROKA: That is all right. The
8 quotation is accurate. I do make mistakes and I don't
9 mind confessing them.

10 THE CHAIRMAN: Yes, the gentleman at
11 the microphone.

12 THE PUBLIC: If I could get back to
13 Mr. Campbell's question, I would like to make my own
14 personal answer to it if I may, regarding the
15 qualifications and qualities that one requires of
16 somebody who is engaged in drug education, parti-
17 cularly regarding their ability to put across facts.
18 I think the cases where one can make a very definite
19 and positive assertion as to what is fact and what
20 is not, are very few and far between. I think looking
21 through the discussion of the facts in the Interim
22 Report this was made very clear and I think in that
23 situation there is maybe only one really honest way
24 of putting across indication for gathering facts
25 and that is to outline the areas of the controversy
26 and to encourage discussion of the controversy .

27 MR. CAMPBELL: A point that I was
28 getting at, ^{there was this} for a long time ~~there was this~~ great emphasis placed
29 on ^{methods of} teaching, and I think it seems to me, historically,
30 for decades, ~~this~~ overshadowed emphasis on the

1 academic competence of the teacher. I used to get
2 students who were brilliantly taught all manners of
3 junk about society. They got into my classes and
4 I spent the greater part of the year teaching this
5 junk they had to have. And so that may (inaudible)
6 this question of drug education , the flow of this
7 conversation having to do with credibility and
8 matters of rapport -- not for a moment underestimating
9 the fact that there can be those areas where
10 we have some (solving) factor, be concerned by that
11 brilliant teacher who holds this information
12 and I am wondering just how society responds withing
13 these areas. And I have similiar concern with
14 mathematics or history or sociology but here we are
15 in an area of education outside which there is
16 (inaudible) . . . response as to just how we need
17 inquire if a person is competent or incompetent to
18 teach.

19 THE PUBLIC: I would say that regardless
20 of what the area of education is, regardless of what
21 sources ~~or~~ justification a person is able to acquire,
22 and most particularly in the field of drug education,
23 I would be very, very suspicious of anybody who is
24 going to stand up and say, "I am right. I have the
25 facts. You have to listen to me."

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28 --- pg. 42 follows
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1 THE CHAIRMAN: Gentleman at the micro-
2 phone.

3 THE PUBLIC: Yes. I think you are
4 placing much too much importance on the qualifications
5 of the teacher. Children will believe almost any-
6 thing that you tell them if what you tell them works.
7 Now, the point is you can tell a child any kind of
8 information and I don't think it matters very much
9 how involved the person is. If he finds in his
10 later life that this information will work for him,
11 he will accept it. He will accept any kind of
12 guidance that you give him. But it does not really
13 matter how good, or whoever your teacher is, if the
14 child grows up and goes into the later stages in
15 school, and -- he will make value statements. If
16 you tell people that, "We are going to tell you about
17 drugs and other substances", you are immediately
18 making the statement that life is worth living.
19 I am sure that a number of people in the so-called
20 drug culture would argue that with you and say that
21 life is not necessarily worth living that much, and
22 they don't really care.

23 Now, if you can give people the kind
24 of life where they feel that life is worth living,
25 then ^{will accept} ~~they~~ of the information you give, especially
26 to little children -- but if you cannot provide
27 them with the fact that life is worth living, it
28 doesn't matter who you are or what you tell them.

29 THE CHAIRMAN: Thank you.

30 Well, I think we will have to ponder

1 these questions, Mr. Potoroka, and discuss them
2 together. We welcome any further views that you
3 would like to send on to us.

4 MR. POTOROKA: Mr. Chairman, we do have
5 a strong committee with the Board, and if we work
6 from here on in, I think I shall be relying on them
7 rather than they on me.

8 THE CHAIRMAN: Thank you very much.

9 Dr. Lehmann?

10 DR. LEHMANN: I would like to ask a
11 question of the gentleman who was at the microphone
12 just a few moments ago, and who said he would be
13 very suspicious of anyone who would claim that he
14 has the definitive facts about any kind of drug
15 problem. I do not quite understand this. Could you
16 explain this again, please?

17 THE PUBLIC: I'm not trying to suggest
18 that there aren't some things that we may be so sure
19 of that we regard them as facts, but I think, when
20 everyone is in a position of trying to convey this
21 information to someone else, the emphasis should be
22 on trying to explain why you are convinced that they
23 are facts. If the emphasis, on the other hand, is
24 on the fact itself, a closed fact, it may be factual.
25 And if this person is using their authority, their
26 position and personality and capability as a teacher
27 to underline the genuineness of this fact, then to
28 me that is an abuse of the educational prerogative.
29 The particular situation, a very special one where
30 there is very often a presumption that the person who

1 is teaching is knowledgeable and he teaches with
2 authority and it would be accepted and if it is
3 accepted because of the personality or authority
4 of the teacher, then, I think that is then abuse.

5 THE CHAIRMAN: Thank you.

6 We call now on Dr. Colin Gillespie
7 and Dr. T. M. Roulston, and Mr. Benjamin Levin.
8 I understand, Dr. Gillespie -- do you wish to testify
9 now -- Members of the Board of Directors of the
10 Community Welfare Planning Council of Greater
11 Winnipeg.

12 THE PUBLIC: I am sorry, Mr. Chairman,
13 I think the Planning Council has its wires crossed
14 here, because I was not aware they were to make a
15 formal presentation at all. I don't think
16 Roulston were
17 Mr. Levin and Dr. /was aware of it either.

18 THE CHAIRMAN: Well, that must have
19 been our mistake, then. We will then call on
20 Mr. Eddie Walker.

21 Would you like to sit at the table,
22 Mr. Walker?

23 MR. WALKER: Ladies and gentlemen,
24 I would like to ask the Commission how they view
25 the statement of Judge William Little of the
26 Juvenile Court when he said, "The cigarette is the
27 first easy stepping stone to narcotics and delin-
28 quency." That was his quotation, and I would like
29 to ask the Commission what they feel about that.
30 Is it really the first easy stepping stone to
narcotics and delinquency?

1 THE CHAIRMAN: Well, we are not here
2 to answer questions, Mr. Walker; we are here to ask
3 them.

4 MR. WALKER: I see. My pamphlets
5 have been handed in to the Commission, and I guess
6 they will view them over at their leisure -- look
7 them over. And perhaps we ought to have some reply
8 from them.

9 It would take too much time right now
10 for me to read ---

11 THE CHAIRMAN: No, we haven't had the
12 chance to read it. Perhaps you could give us your
13 views in a general way, now. Could you just give
14 us your views, generally, now? And we will read
15 your paper later.

16 MR. WALKER: Judge Little, who is a
17 judge in Toronto -- my views are that the cigarette
18 is the first easy stepping stone to narcotics and
19 delinquency, and therefore they deal -- it's a
20 stepping stone to all drugs, LSD, and I think we
21 should have a pledge song in the schools whereby
22 the children would become defiant of surrendering
23 to these things. If they didn't surrender in the
24 first place to the cigarette, they would have more
25 strength to ^{not}/surrendering to marijuana, which is
26 also smoked anyway, I believe.

27 DR. LEHMANN: You would not include
28 alcohol as a stepping stone?

29 MR. WALKER: Oh, yes, it's a stepping
30 stone to alcohol too, because the first way to act up

1 is to smoke a cigarette. You're a sissy if you
2 don't smoke, you're a "toughie" if you do,
3 so this is up to you. You've either got to be a
4 "toughie" or a sissy. So, therefore, it's
5 delinquency. This is the way Judge Little takes
6 it anyway, and he has written twice about it. And
7 that's his attitude about it.

8 MR. CAMPBELL: Mr. Walker, when you
9 speak about pledge song, I'm not sure I quite under-
10 stand it. What do you mean by pledge song?

11 MR. WALKER: A pledge song that would
12 be sung by children in schools. I mean they have
13 singing commercials, they find that they pay; the
14 liquor people have their beer ads, and the children
15 can very easily catch the tunes of that, and they
16 sing those, and therefore they are influenced by this.
17 If they weren't influenced the companies would very
18 soon take them off. But they have found that they
19 can influence people by commercials, singing com-
20 mercials. And there is no such thing as a singing
21 commercial for health and morals in the schools today,
22 no such thing.

23 THE CHAIRMAN: Well, this is your
24 principle concern -- this is your principle concern
25 in associating the cigarette?

26 MR. WALKER: Yes, associating the
27 cigarette, as Judge Little does, with narcotics
28 and delinquency. And, of course, the fire they had
29 in France recently where 145 children were burned
30 to death in ten minutes, or suffocated in that fire

1 which took place a little over a week ago, and only
2 the other day there was a woman taken from the Lyon's
3 Manor Hall, smoking on the chesterfield, and she was
4 suffocated too. I don't know whether she survived
5 or not but she was taken to hospital. And if there
6 had been more people in the rooms at the time, if it
7 had been evening or night time, there might have
8 been loss of life there too.

9 THE CHAIRMAN: The gentleman at the
10 microphone?

11 THE PUBLIC: I would just like to add
12 a touch of humour at this point. I know several
13 people who, in fact, are capable of smoking dope
14 and who do smoke dope, and have never smoked a
15 cigarette in their lives. Possibly, this harmless
16 joint that they smoke is the first step towards real
17 cigarette addiction, which might in fact kill them
18 some day because of cancer; the results of people
19 who smoke and don't drink. So, as to the matter of
20 the stepping stone, I am not sure which way they are
21 stepping; if the stone will float.

22 MR. STEIN: Are you working on this
23 alone, or do you ---

24 MR. WALKER: I'm entirely free lance
25 on this subject here. I have no responses except
26 the Cancer Society in New York which has just
27 written me last week, congratulating me, and also
28 the Rosswell Park Memorial Hospital where they treat
29 drug addicts.

30 MR. STEIN: Are you familiar with

1 Nicotine Anonymous in Washington State?

2 MR. WALKER: Not the Nicotine Anonymous,
3 no. But I have had letters from the Cancer Society
4 there and also, as I say, from the Rosswell Park
5 Memorial Hospital where they treat drug addicts,
6 and they are very much opposed to the smoking.

7 MR. STEIN: Well, I suggest -- perhaps
8 I could even find the address for you. You might be
9 interested in this group in Washington State ---

10 MR. WALKER: I would definitely be glad
11 to have it, yes.

12 MR. STEIN: They have people who have
13 decided they want to give up smoking but have diffi-
14 culty doing it, the same sort that the Alcoholics
15 Anonymous people have.

16 MR. WALKER: Well, I've heard of
17 Alcoholics Anonymous, but I haven't found their
18 address yet.

19 MR. STEIN: My wife, as a matter of
20 fact, is receiving a newsletter, and regular phone
21 calls which, of course, you could turn down if you
22 wanted, but I will try and find the address for you.

23 MR. WALKER: I would be grateful to you
24 if you could find the address and I will be glad
25 to send some of my material to them, because, as I
26 say, the Cancer Society has given me great encourage-
27 ment this last week in a letter, and they are putting
28 my stuff on file, hoping to use it. So that,
29 apparently somebody thinks I'm not crazy.

30 THE CHAIRMAN: Gentleman at the micro-

1 phone?

2 THE PUBLIC: Yes, I think the point
3 that you are getting into that liquor causes death;
4 I mean, most people in society form habits which may
5 shorten their life span. Now, where do ^{you} come to when
6 you try to draw the line? What can you tell these
7 people when you entertain the same, or similar habits
8 yourself? And when you try to tell these people,
9 the people who take drugs, that the main point is
10 to try to live as long as possible, just to extend
11 your life span as long as possible -- because you're
12 going to have a terrible time and get into arguments
13 because nobody in our society lives that way.

14 And I think your problem is, you have
15 no value, you have no point where you make a median
16 or a balance between the idea of just living, just
17 living for some meaning, or to something. I think
18 this kind of discussion shows it.

19 THE CHAIRMAN: Dr. Lehmann?

20 DR. LEHMANN: Would you -- the last
21 gentleman at the microphone -- would you have any
22 suggestions as to how to impart to other people the
23 conviction that there may be something in the
24 quality of life that is in some way related to
25 taking drugs, or not taking drugs, ^{and} how this program
26 should be set up?

27 THE PUBLIC: Well at the present time,
28 I wouldn't attempt to. You have to go through
29 the same kind of experience as a child going through
30 school . It doesn't really matter what you tell

1 them in kindergarten or the first three elementary
2 grades. He doesn't learn from what his teachers tell
3 him; he learns from his experiences on his own.
4 That teaches him that life isn't really worth living
5 very much and there isn't any great point in extending
6 the life span as far as we can so there is no way
7 of telling him not to take drugs.

8 MR. CHAIRMAN: Why does it teach him
9 that life isn't really worth living? Where does
10 a child get this idea?

11 THE PUBLIC: Well, I believe that
12 children in our kind of society spend twenty years,
13 not just children, but young adults, to deal with
14 the structure . It's like a game and that game is
15 that life is not really that pleasurable; it is
16 mostly a struggle.

17 MR. CHAIRMAN: What is the measure
18 of the value of life?

19 THE PUBLIC: What measure can you
20 give them?

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1 THE PUBLIC: The conclusion that they
2 draw is that life isn't worth that much, or for any
3 great value statement. For what they'll
4 tell you and what they have told me is that, "We
5 don't really care, we haven't found life as normal,
6 standard people live it, particularly pleasurable."

7 THE CHAIRMAN: Could I just ask you
8 whether or not it is
9 to pause there for a minute? Is the test/pleasurable
10 at all times?

11 THE PUBLIC: Well, since for these
12 people many times there isn't any other meaning,
13 pleasure becomes the last denominator.

14 THE CHAIRMAN: Well, are you suggesting
15 that we can only make life meaningful by rendering
16 it constantly pleasurable?

17 THE PUBLIC: No, but since no other
18 values are provided at present in our society,
19 pleasure is what remains. That is the last criterion.

20 THE CHAIRMAN: Well, maybe then --
21 maybe the lack of a concept of life, imparted in
22 instruction, is it possible that that
23 could lead to a distorted criterion of its value?

24 THE PUBLIC: If this is not a result
25 so much of the method of instruction, but not so
26 much as what's being taught.

27 THE CHAIRMAN: But you say a child is
28 taught only through his life experiences, but if it
29 is not to be measured by the extent to which it is
30 pleasurable, there must be some gap in the child's
total understanding of life, there must be a gap in

1 the total structure.

2 THE PUBLIC: I don't think so; I don't
3 think the structure can teach a person how to live.

4 THE CHAIRMAN: Well, perhaps truth
5 can teach them something that they are able to infer
6 from experience alone.

7 THE PUBLIC: I don't think they are
8 strong enough. I know that experience, to these
9 people at least, the principle source of truth
10 is their own lives. The point is, ^{if} what you tell
11 them and what they experience don't contradict, then
12 you could have a lot of success doing this by
13 instruction. But if what you tell them and what
14 they experience in life do contradict, what you tell
15 them will be cancelled, wouldn't have much relevance
16 to them, because a person's life, a person's own
17 experiences bear more weight in his own way of
18 thinking than what he is taught. Because something
19 that is taught, it is not concrete to these people.
20 Their personal experiences are concrete and that's
21 what will matter eventually.

22 THE CHAIRMAN: I think we would agree
23 with you on that. We have to agree with you on
24 that -- experience in the long run and in the
25 effect that experience ~~is~~ more valuable than what is
26 taught. Why do you -- you've raised a funda-
27 mental issue. Why do you feel -- why should young
28 people feel that life is not worth living?

29 THE PUBLIC: Well, consider the kind
30 of system we go through. They go through a kind of

1 system with a very heavily regimented -- any kind
2 of personal expression is very much discouraged,
3 the accent in our authoritarian school system
4 is on moulding with the group, not demonstrating any
5 individuality, and having no personal identity. And
6 when you destroy somebody's identity to that extent,
7 you are reducing any will to live. Because to me,
8 the will to live comes from the person's individuality,
9 of his self, his desire to maintain his individual
10 existence. When you deprive a person of his mental
11 individual existence you are stripping away at his
12 desire to live. All he would have left is this
13 desire for pleasure because this is a basic physical
14 desire and no matter how much you destroy his higher
15 mental function, his higher individual mental function,
16 he will still feel the need for food, and sex,
17 pleasure comes in; that's where pleasure is the
18 last resort in the desire to live. But in his higher
19 need to live come the spiritual needs. They are
20 managed from the individual spirit, and when you
21 destroy the individual spirit, there is no more
22 fixed desire.

23 THE CHAIRMAN: Professor Bertrand?

24 PROFESSOR BERTRAND: Yes, it seems
25 that out of the pieces of research that we may have
26 on this very interesting issue that you are dis-
27 cussing, it seems that some foreknowledge
28 comes to us, or perhaps you have read research
29 pieces, and if you have not yet and you will.
30 For instance, there is Lazlo on Transmission of Views

1 and Transmission of Wishes to Live, which shows
2 that this is not alone; that a human being achieves,
3 or, how would you say -- grasps the reasons for
4 wanting to live. There is an interaction, a signi-
5 ficant interaction. So, I'm/sure that your thesis
6 would stand.

7 THE PUBLIC: The individual's will to
8 live is derived from his interaction from others,
9 and the kind of interactions he has.
10 The kind of interactions he has when he feels that
11 other people make it valuable to him, whether his emo-
12 tional interactions are good too. But if they aren't---
not

13 PROFESSOR BERTRAND: But/only that.-

14 THE PUBLIC: But if he is restricted
15 from them as he so often is in the school system,
16 then you are cutting the basis out on that.
17 So, that's the point I'm getting to, that you are
18 restricting a person's ability -- not only his
19 ability but his opportunity to interact and having
20 these meaningful interactions that are
21 When you do that, you are ---

22 PROFESSOR BERTRAND: Then you are
23 depriving them from -- yes, I follow you.

24 DR. LEHMANN: Well, your critique of
25 the present educational system then seems to be a
26 very harsh one. Could you be a bit more specific?

27 THE PUBLIC: Yes, I could, but I would
28 have to refer to specific conditions in Winnipeg,
29 if I may.

30 In Winnipeg you have largely elementary

1 schools where you have very small children, and shove
2 them into very large groups. This is not, to me,
3 good for a small child's development to be stuck in
4 with five hundred or a thousand other small children.
5 This is not the way to develop a child's individuality,
6 especially in the case of Winnipeg where you have
7 school districts that are so designed that you have
8 one social class, one wave of thought represented
9 entirely in one school with no alternatives, no
10 opportunity to think that there may be some stimulus,
11 some new idea coming in. When you go into Junior
12 High Schools, you have the same basics, the same
13 rigidity and the same authoritarian structure, and
14 this continues right on through Junior High. There
15 is no time in that person's experience, and this is
16 twelve or thirteen years, and this is his entire
17 youth, and this is where he spends the majority of
18 his time. This is almost his total environment
19 because the family does not matter as much as it
20 used to. The child spends so much time in school
21 and with his companions in school. This is where
22 his mind is formed. And if the environment is
23 totally totalitarian, what else would result. His
24 identity is nearly totally destroyed. He is given
25 no idea that taking personal responsibility has a
26 joy and meaning, being responsible for yourself
27 as a person with your own mind. He knows nothing
28 of that because there is nothing in the educational
29 structure to have taught him.

30 THE CHAIRMAN: Well, we have heard a

1 lot of criticism of the education system across
2 Canada. It is very disturbing because to try to get
3 a true understanding of what is feasible and what
4 more can be done; it is all very perplexing. I'm
5 asking you, are you asking, maybe, too much of the
6 years in which there has to be some systematic
7 structure, some intellectual educational discipline,
8 there has to be some rather tedious, hard learning.
9 Are you asking too much in terms of freedom and
10 scope, and further, I sense that there has been --
11 my impression has been that there is more encourage-
12 ment given to individual work on your own projects,
13 and I refer to my own daughter who just about
14 drove me crazy to get works on the Conference of
15 1887, and her assignment was to write a five page
16 paragraph on something about which there is very
17 little historical -- I find. And I was astonished
18 at that age that when she went to the public library
19 she was not satisfied. She was ransacking our
20 library.

21 I do not think that is very typical,
22 you know. There is lot much more research initiative
23 than in our time, I suspect. Do you think you are
24 asking for too much?

25 THE PUBLIC: I am not asking for
26 anything. I'm not trying to make a direct judgment
27 on this system, I'm just wondering what will happen.
28 I know there are some things like that in the school
29 system where people will be given the opportunity to
30 do more intellectually stimulating work, and this

1 is encouraging because there is not enough of it.
2 But for the most part there is still not enough
3 interaction. But the main point is that I am not
4 asking for anything. It just depends on how much
5 money you spend. If you spend more money you can
6 have schools where you are not shut together with
7 two thousand people. This is not a good environment
8 when you are shoved into an educational factory.
9 The structure is so cumbersome. Regimentation almost
10 has to be imposed because of the sheer weight of
11 the system, the sheer number of people to be regu-
12 lated and shoved from one classroom to another.
13 No matter how much intellectual stimulation you
14 give them, you are still destroying their minds that
15 way. You are still not allowing them to have meaning-
16 ful personal interactions, or meaningful interactions
17 within their own minds, because when you shuffle a
18 person like that down straight corridors and making
19 straight angles into set classrooms where they have
20 a particular place to sit, that is what will be left
21 on their minds after a while -- making straight lines
22 and ninety degree angles and putting little ideas
23 in little places. And it does not matter if you
24 give them stimulation when you have that. It is the
25 kind of structure to me. It is the kind of way you
26 organize, that this is kind of damaged; not so much
27 what you give to them in the classroom, not so much
28 the text or the kind of material.

29 PROFESSOR BERTRAND: Are you saying
30 really that -- I am fighting with my English now --

1 are you saying that the kind of structure that the
2 school provides is conducive to passivity and inertia?

3 THE PUBLIC: Yes, very strongly. It
4 produces that because there is no opportunity for
5 the individual to take any responsibility for his
6 own behaviour. He is very much discouraged from that.
7 He is told to follow the rules, walk on the right
8 side of the hall, go to the right class at the
9 correct time, do not look out the window, go to the
10 bathroom only when you are allowed; put up your hand
11 first. What else could result.

12 PROFESSOR BERTRAND: Would you accept
13 that it is much more difficult to provide
14 a psychological rule for discussion, openness and
15 creativity than to organize classes for the trans-
16 mission of some knowledge.

17 THE PUBLIC: Of course. It is easier
18 to do it this way. That is why it is done this way.
19 It is cheaper, first of all. It costs less. It puts
20 less on the teacher. You have a lower calibre of
21 teacher this way. Almost anybody can issue orders
22 and demands and use threats. I'm saying, "Okay,
23 you can do it this way, but you will not get the
24 results." You will destroy even the kind of society
25 we have now because you are not turning out people
26 fit to get along in our society, not a new, involved
27 society, but the kind of society we have now. They
28 are not fit to be good economic units, even. They are
29 too passive?. Their characters are not strong enough
30 at all, even for them to develop strong desires to

1 support our economic system. They only want to
2 purchase things now. So, I am saying you can
3 do it that way, but it will not work.

4 THE CHAIRMAN: Gentleman at the micro-
5 phone?

6 THE PUBLIC: Yes, I would like to
7 agree with part of the analysis on the school system,
8 agree
8 but I don't /with the emphasis that he places on it
9 or the consequences. One of Marshall McLuhan's
10 famous quotations or statements was, "All the world
11 is a sage." I am inclined ^{to think} /that there are many more
12 factors in education than simply the school. The
13 parents of a child have become much less important
14 to the total education than it used to be, and the
15 same applies to the school. There is the whole
16 influence of media, the television, and I think that
17 it is the influence of a great many factors, not
18 simply the school, that can either give a person,
19 or help to give a person the will to live, or help
20 to do exactly the opposite.

21 I think one of the reasons, perhaps,
22 why a number of youth in our world today are
23 alienated from the culture and from the traditional
24 values of our society is because they see the dis-
25 crepancy, thanks to television and other media ,
26 between the values and what they are taught and
27 the realities of the world. They are taught to
28 co-operate, to be peaceful, and yet they can watch
29 a war on their television screens. They can see the
30 exact opposite application of the values they are being

1 taught. Perhaps they are taught at home or in some
2 other place that the individual is important and "use
3 your own mind" and then at the school and elsewhere
4 they are told -- well, for instance, students are told
5 by some schools that, "you are not here to learn; you
6 are here to follow the rules." That kind of statement
7 is rather contrary to any recognized principle of
8 education.

9 I am merely trying to suggest that there
10 are many factors beyond the school and the school is
11 not as important to learning as it once was.

12 The lady on the Commission mentioned
13 (Mazlo) and his statements about values and I think
14 that almost inspite of the structure of the school,
15 it is possible for students to learn a great number
16 of positive values simply from the teachers,
17 themselves. It is true that the content of the course
18 is often irrelevant compared to the values
19 communicated by the teacher in the course and these
20 values are really what we call the books on our shelves
21 and the resources for information whereas it is the
22 values that guide our use of the information .

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THE CHAIRMAN: Gentleman at the microphone?

THE PUBLIC: You said that you were here to ask questions and so I will put myself in the position of giving you some, perhaps, practical information instead of lots of theory.

I was a teacher; I still am I suppose. I am a teacher in a unique situation, and the situation runs this way: about a year ago the Winnipeg School Division decided that something had to be done for people who dropped out of school, presumably high schools -- anybody over the age of 16. And they advertised in the community high school bulletin that a teacher was needed for this program. And while sitting in the staffroom discussing it, I found out that a lot of teachers thought that this would be a very horrible position to be in, trapped in a room with thirty drop-outs.

I took the job and I went into the situation with a lot of theories, a lot of theories that are here. Since then, I have learned that the only way to learn about what to do with people is to actually consult them and to find out from them what they want.

So, with that in mind, maybe you have some questions or maybe I can theorize, but I am

1 sort of at a loss to theorize right now.

2 THE CHAIRMAN: Well, what have you
3 decided about what could be done to help people in
4 the situation that you are working with?

5 THE PUBLIC: Well, first of all, we
6 were confronted with the majority of problems
7 basically dealing with what the lady described as
8 Lazlo's Hierarchy of Basic Needs. How do you ful-
9 fill somebody's desire to have food or transportation?
10 Fortunately, in Winnipeg we can afford to support
11 people on welfare, so these people who are in
12 school, provided that they -- they have been excused,
13 I suppose, from receiving welfare on their own, and
14 the majority, we have this group.

15 That was the start, and after that,
16 once you've solved their basic needs, what do you
17 want to teach them? I have a lot of things that I
18 would like to teach. I was very interested at one
19 time in Chaucer, but it seems to me that my interest
20 in Chaucer was not relevant any more. I am an
21 English major -- I was an English major. I don't
22 know what you teach them. But you
23 are here and you are teaching them, so maybe that
24 is a start.

25 MR. STEIN: Is this just since
26 September?

27 THE PUBLIC: December of last year.

28 MR. STEIN: Can you give us any indi-
29 cation of what type of information has been of
30 interest to yourself and to the people that you are

1 working with?

2 THE PUBLIC: We are really involved
3 in working on a democratic school. We meet as a
4 group and decide, as someone said, rules or problems
5 or issues. Originally the curriculum was sort of
6 based on the traditional school. We have to teach
7 math, science, English, and this sort of thing, but
8 there is such a scope in each of these areas
9 that you do not have to bind yourself to any text-
10 books. We, right now, have a total of forty-five
11 students and three teachers. We divided the three
12 groups; the group that I have has just been doing
13 "Games People Play" and has found it pretty arti-
14 ficial. They don't play games. They do not see
15 the relevancy. But I thought it was relevant for
16 them to see, and each was supposed to present, in
17 a lot of cases; they were to present a paragraph
18 on certain things, but in a lot of cases we found
19 that this is impossible to get.

20 We have gone to the courts and sat
21 in the courts and watched what was going on there.
22 We sit around and talk a lot. Sometimes we end up
23 playing a sort of game like, "Who am I?" and you
24 take a position, you try to find out the person.--
25 you fill in time.

26 THE CHAIRMAN: Could I ask you, from
27 your experience, and any others here, how much time
28 is spent in school, not necessarily in a school,
29 but in a particular course, is any significant amount
30 of time spent on the meaning of life; why one should

1 want to live, what one should want to do with one's
2 lifetime, what gives them meaning; satisfaction?
3 Is there any significant time spent on that in one
4 form or another? That is what you are talking about.

5 THE PUBLIC: I think, basically, when
6 you put people in a situation where they have to
7 spend, say, five hours a day together, they are
8 learning the meaning of life, where they are under-
9 standing what it means to deal with each other,
10 and what problems there can be when you are with
11 each other.

12 Now, if you have a course called "The
13 Meaning of Life", I would call it religion and I would
14 call on every representative of each religion and
15 have them talk. But everybody has their own defini-
16 tion of that. Maybe it just means sitting and
17 talking about it, or writing about it if that happens
18 to be the case. Was that the kind of question?

19 THE CHAIRMAN: Yes. Well, it seems
20 that what has been said this morning by people is
21 that there is a basic education, basic idea of
22 education, and Mr. Potoroka was talking on this too
23 in his brief; basic education, but what you would
24 have to have first, which is just this question of
25 meaning, this will give you a desire which will then
26 give you a sense of the value of what you are going
27 to learn further.

28 And then there is an education into
29 such basic things as how to calculate a figure,
30 or write, and so on, so you can make your way

1 vocationally. But where are we getting this basic
2 education, and understanding of life, which provides
3 the foundation, the motivation to go on?

4 THE PUBLIC: From television, presumably.
5 Not from books, anyway. From each other, maybe ---

6 THE CHAIRMAN: Not being a part in the
7 schools in any way?

8 THE PUBLIC: I don't think I can
9 answer that. Because if this experiment were going
10 on, if this kind of thing was happening all over,
11 it would be happening in grade schools, and somebody
12 from the grade schools would be here saying, "Well,
13 I discovered this", instead of standing up and
14 saying, "These are my theories."

15 We make room in our school for basic
16 education, but we also make that a choice. We
17 allow people to choose what form of basic education
18 they want. For example, if they want to get a
19 grade 12 education, and that will open the doors
20 to a job for them, we will provide everything we
21 can to speed them along.

22 We had one fellow come in with grade 6,
23 he stayed at the school for five months, was trans-
24 ferred over to adult education, received entrance
25 into grade 12 after a month and a half prep course,
26 and decided to return to the school because grade 12
27 meant nothing to him. It meant that he would have
28 to study things that related to nothing that was
29 happening, or at least, that he considered was
30 happening right now, so he stepped back and said,

1 "I'm going to spend part of my time in your school
2 trying to set up
3 and part of my time / other schools like this."

4 So, he has been successful. (Inaudible), St. Boniface
5 he presented
6 and St. (Vital) looked at the problem/and joined
7 together, I think, to consider forming a school.

8 MR. STEIN: Just one point of clari-
9 fication. Is the school that you are working with,
10 or the group that you are working with, a part of
11 the structure of the Winnipeg School System or is
12 it funded by the City as a separate autonomous ---

13 THE PUBLIC: We are sponsored by the
14 Winnipeg School Division, who are sponsored by the
15 Department of Education. That means that we have to
16 spend a certain number of hours per day together,
17 because they have rules about how long school should
18 be. We get our books through the Winnipeg School
19 Division, which means that we have a certain amount
20 of money we can spend buying any books we like;
21 the textbooks or pocketbooks, so basically we are
22 sponsored through the School System.

23 Maybe somebody from the school will
24 stand up and answer any more questions.

25 THE CHAIRMAN: Yes, the gentleman at
26 the microphone?

27 THE PUBLIC: Yes, I would like to say
28 again, I feel even in that kind of a situation,
29 (inaudible) a better than a different kind of
30 school, with more openness, what you teach children,
no matter how well you teach it, won't be accepted
unless they can go out in their own life and find

1 justification for it. Now, getting on to this matter
2 of outside the school, they consider in some detail,
3 just looking at it, what kind of influences do they
4 have outside? Well, first of all, television. What
5 could encourage passivity more, when you sit for
6 eight hours a day being passive, than to come and
7 sit in front of a box which shows events that occur
8 fifteen hundred or two thousand or ten thousand
9 miles away? How much involvement do you think
10 people can have? They can look at things which are
11 so infinite. This increases the sense of alienation,
12 if anything, so they react and become violent because

13 taking illogical, irresponsible course
14 of action about a situation they are concerned about.
15 They have no such knowledge of this, and they just
16 become indifferent, and they come to accept mass
17 violence because they have no choice. They have
18 no knowledge to begin with on how to effect things,
19 and then they come to these things that are two
20 thousand miles away. I don't see where this greatly
21 helps them to become responsible individuals.

22 For any other influences, in the total
23 they
24 amount of time in which/are in school, and TV, there
25 isn't really all that much left.

26 You have people's friends, but these
27 are mostly friends from school, and school environ-
28 ment affects the kind of relationship that they are
29 going to have. They have no stimulation from outside,
30 that comes into their personal environment; they
31 have TV, something occurring a long distance away.

1 It informs them, but it doesn't stimulate them
2 in their own world. It creates a dichotomy, a
3 separation of some kind of fantasy/that's going
4 on in Saigon and the world in Winnipeg. And that's
5 all it accomplishes.

6 DR. LEHMANN: Could you tell us why
7 this problem has become so very serious now? It
8 was always there, existed; the need to teach funda-
9 mental values in life, too many in one classroom
10 and so on, even thirty, forty years ago. Now, why
11 did previous generations not react in this -- well,
12 why didn't they turn off as the younger generation
13 does today?

14 THE PUBLIC: I think it's because of
15 the change in domestic environment, and they want
16 to get down to the relevance of domestic environ-
17 ment. Children, thirty or forty years ago, outside
18 school had a much tougher situation to deal with,
19 by and large. They had many more challenges in
20 life, like surviving and eating. Kids in the sub-
21 urbs of Winnipeg these days don't have those
22 problems. They don't have desperate external states
23 of life. School tends to be it all, because there
24 is nothing else. There is nothing in
25 their environment which is more important than
26 school, like there is no desperate need to drop out
27 of school to keep eating, as people did thirty and
28 forty years ago. I know many adults who did.

29 DR. LEHMANN: You mean we need another
30 depression?

1 THE PUBLIC: No, we can do other things
2 than that. But if you ask me why it's happening, it's
3 the timing; that's why it's happening now. People
4 aren't faced with the immediate challenge of their
5 environment that they were then. I am not recommending
6 a depression , but that's the reason why.

7 THE CHAIRMAN: Thank you.

8 Gentleman at the microphone?

9 THE PUBLIC: With students like that
10 it is easy to see how some of the teachers begin
11 to feel that maybe they can learn something from their
12 classes. We have a class at the University and a
13 number of us came here to listen to the Le Dain
14 Commission. It deals with, generally, this problem,
15 a problem I would not admit to in the classroom but
16 I can say here: a cultural revolution is taking place
17 in North America and that question you asked from
18 us of what has happened in the last 50 years, I think
19 that the whole content of your report should take this
20 into account, the fact that drug use is really only
21 one aspect, maybe a very salient aspect of a total
22 change in the environment as experienced by the younger
23 generation, and a change in the dynamics pf socialization,
24 a change in the dynamics of interaction.

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1 The affluence of society, the existence
2 of the possibility of terror, nuclear holocaust,
3 the television, and dozens of other things that we
4 have heard here or read about, all these focus on
5 the younger generation, producing the kind of gap
6 we always hear about, of which drug use is but one
7 example.

8 I, in effect, don't envy the role of
9 the Commission, because not only as you get into
10 your subject, it's obvious that you have to do more
11 than just deal with the technical drug situation.
12 Here is your meeting today in which education comes
13 in, in which all these subtle problems of the
14 society, in transition, have to be looked at. And
15 in that sense, where, and who knows, how broad your
16 report should be. I found it of great use in my
17 classroom, and I think that the impact and the
18 graduated impact of the report -- the fact that you
19 came in with an interim report, may have served to
20 prepare public opinion for the kind of ultimate
21 report that will come out, where some of the recom-
22 mendations that you seem to be leaning towards,
23 might be finalized in a -- perhaps a stronger form.
24 Because it is -- and this, I am speaking very
25 subjectively -- it is inconceivable to me that the
26 kind of Draconian punishment that may be inflicted
27 upon kids just for possession or use of one substance
28 rather than another can continue in society.

29 THE CHAIRMAN: I call now on Mr. Charles
30 -- excuse me, gentleman at the microphone?

1 THE PUBLIC: Yes, I just wanted to
2 make one comment in regard to this whole idea of
3 a cultural change. Whether the widespread belief
4 that science could solve the world's ills, which is
5 how the philosophers of the early 1900's felt, and
6 of course, science's answers to questions, as
7 everybody knows, have been fantastic, but there
8 has been the unspoken assumption that science could
9 somehow solve, not only questions of empirical
10 reality that are, strictly speaking, scientific
11 questions, but also questions of ultimate meaning.
12 And it is only in these past two years that the
13 fact that this is impossible has become evident,
14 and the result, partly, I think, is this drug scene
15 that has caused this Commission to form.

16 I am just wondering, perhaps, what
17 on this
18 some other opinions/are; the extreme trust in science.

18 THE CHAIRMAN: Thank you.

19 I call on Mr. Charles Norman.

20 Mr. Norman?

21 MR. NORMAN: I am the father of three
22 children, and that's why I am here. I am here as
23 a parent, not as an educator, or with any sort of
24 intellectual prescience whatsoever.

25 I did not submit a brief to this
26 Commission the last time you were in Winnipeg
27 because it did not seem important. At that time
28 I had no idea that your Commission was as incredibly
29 biased as it is -- a bias which is made clear in
30 the third paragraph of your interim report.

1 I quote: "During the year or so
2 preceding the appointment of the Commission, members
3 of parliament had called for an inquiry into the
4 use of drugs. One member spoke of 'the galloping
5 increase in the use of marijuana and the increasing
6 number of young people tragically being paraded
7 daily before the courts.'"

8 Your selection of this particular
9 quotation indicates a distortion of the concern of
10 members of parliament for the growing use of drugs
11 by our young people into a concern for the fact
12 that young people are "appearing in court" rather
13 than a concern for the fact that they are using drugs.

14 I am also quite sure that those members
15 of parliament who urged the government to set up
16 this Commission did not intend that they should be
17 presented with yet another report on the effects
18 of alcohol, yet you seem to have taken it upon
19 yourselves to do so.

20 There is no connection between the
21 use or abuse of alcohol and the drug subculture,
22 yet you have chosen to cloud the issue by an attempt
23 to confuse the two. This is a favourite tactic by
24 users of marijuana attempting to justify the use
25 of the drug, but it is not what we would expect of
26 a commission appointed by the government of Canada
27 to conduct an investigation into what has become
28 a major problem.

29 You seem to be convinced that
30 marijuana is harmless in spite of the fact that

1 you mention personality changes due to the use of
2 the drug in your interim report. The victim of a
3 personality change may very well consider the
4 change to be an improvement but he is hardly in
5 a position to be an objective judge.

6 In paragraph 216 on page 97 of your
7 interim report, you state that "The Addiction
8 Research Foundation of Ontario has recently conducted
9 a study of 232 confirmed marijuana users in Toronto",
10 and in the next paragraph, "Preliminary observations
11 suggest the following characteristics in this sample:
12 the subjects tended to be multiple drug users,
13 more than half had tried LSD and speed, one third
14 had tried opiate narcotics, and most had trafficked
15 in marijuana...about half had driven a car while
16 under the influence of cannabis and of these subjects
17 more than half felt their driving ability was
18 unimpaired by the drug; the subjects tended to be
19 underactive physically, engaging in passive pursuits."

20 In paragraph 218, "the researchers
21 stress that their findings demonstrate an association,
22 and not necessarily a causal relationship, between
23 the regular use of cannabis and other drugs."

24 Again, on page 138, paragraph 290,
25 a report from R.C.M.P. Assistant Commissioner
26 Carriere: "With the emergence of marijuana and
27 LSD abuse, the amphetamine drugs, particularly
28 metamphetamine, gained considerable popularity
29 to the point where today a very active illicit
30 traffic is in existence."

1 And in paragraph 293, "the consensus
2 of opinion among our investigators is that the large
3 majority of cannabis users also use, or will use,
4 amphetamines, methamphetamines and LSD.

5 While marijuana may itself be harmless,
6 it is certainly part of the drug subculture. Its
7 use is definitely associated with the use of much
8 more harmful drugs. While no scientific reason has
9 been discovered for the graduation from marijuana
10 to other drugs, it appears to have been established
11 that this in fact does happen. I submit that it is
12 not very scientific to ignore an established fact
13 simply because no scientific explanation for it
14 can immediately be established. With regard to
15 this, I find that I must agree with the Commission
16 on one point -- I refer you to the top of page 155,
17 "In many ways we are closer here to the art of the
18 novelist than that of the social scientist."

19 The other drugs which are part of
20 this subculture can be shown to be harmful to any
21 but the most obtuse person, and since marijuana
22 is so closely connected with these drugs it is
23 almost certain that the increased use of marijuana
24 would inevitably lead to an increase in the use of
25 the most dangerous drugs.

26 Because of this direct connection,
27 marijuana must be considered as dangerous as the
28 most dangerous drug used by the subculture, and
29 the existence of the subculture must be considered
30 as dangerous to our society, and especially to our

1 children, as the most dangerous drug it uses.

2 I therefore submit that this very real
3 threat to the lives and health of our children must
4 be contained. The only assurance that our children
5 will not be using heroin at a very young age, as
6 is happening in New York at this moment, is to make
7 sure that none of these drugs, including marijuana,
8 is available to our children.

9 This means that none of these drugs
10 may be available to anyone in Canada and that the
11 drug subculture must disappear.

12 The vast majority of people in this
13 country do not believe that any infringement on the
14 freedom of the individual is incurred by denying
15 the pleasure of marijuana to a few people in order
16 to protect our children from the problems caused by
17 the non-medical use of drugs.

18 I propose that the penalty for pos-
19 session of marijuana, LSD, narcotics and any other
20 drugs which do not have a medical use but one used
21 by the drug subculture, be a minimum of five years
22 in prison. A minimum penalty is necessary since
23 this discretion cannot be left to the courts because
24 of the prevalence of the use of marijuana by law
25 students at the universities.

26 Other drugs used by the subculture
27 but which have a medical use, would be available on
28 prescription but would be dispensed by government-run
29 agencies rather than drug stores. It would be
30 necessary for the recipient to positively identify

1 himself before obtaining a prescription. This
2 would make it possible to control the use of
3 amphetamines, etc.

4 Unauthorized possession or trafficking
5 would be subject to the same penalties as for
6 marijuana. The same penalties should, perhaps,
7 apply to anyone advocating the use of marijuana
8 or any other illegal drug.

9 Five years in prison may seem a rather
10 harsh sentence for what may be a single offence
11 by a very young person -- it may only be effective
12 in driving the drug culture deeper underground. An
13 individual, after being arrested, and before being
14 charged, would have an opportunity to opt for a
15 period of detention in a "quarantine centre". In
16 these centres people would be well cared for, the
17 best psychiatric help in Canada would be available, and
18 education would be available. They would be able to
19 live in reasonable comfort and security.

20 Those people detained in these centres
21 would not necessarily have to serve five years but
22 would be free to leave as soon as it was felt that
23 they would no longer be a threat to our children.
24 One requirement before release would, of course, be
25 that they provide authorities with the name of the
26 person from whom they purchased the drug in question.

27 Any person leaving a quarantine centre
28 without permission would be charged, and would be
29 required to serve the remaining five years.

30 Any person being released from a

1 quarantine centre would not have been charged and
2 would therefore have no criminal record. Five years
3 after the offence all records would be destroyed.
4 A second offence within five years would result in
5 consecutive jail terms for both offences.

6 I am not very hopeful that the members
7 of the Commission will accept these suggestions but
8 I am sure that the vast majority of Canadians feel
9 that it is time to call a halt to this slow des-
10 truction of our society by the drug culture. I
11 sincerely hope that the full weight of what the
12 Commission calls a public "attitude or social
13 response" will be brought to bear on our elected
14 representatives.

15 I would like to remind the Commission
16 that from what I have heard so far, the population
17 of Canada is not represented here, and you should,
18 perhaps, remember that outside of this room there
19 is all of Canada which is very concerned but not
20 very vocal in this matter.

21 THE CHAIRMAN: Thank you.

22 Do I understand that you recommend
23 that simple possession for use of marijuana be
24 punishable by a minimum of five years in prison?

25 MR. NORMAN: Or an alternative.

26 THE CHAIRMAN: What alternative?

27 MR. NORMAN: The alternative is to opt
28 for a detention centre, but not a prison.

29 THE CHAIRMAN: What would be the
30 difference? What would be the difference between

1 this detention centre and prison?

2 MR. NORMAN: It would be a lot more
3 comfortable, there would not be an association with
4 hardened criminals, and I think, more particularly,
5 children -- they would be well cared for and the
6 psychiatric problems which people seem to be very
7 concerned for here, would be looked after to the best
8 of our ability. And once they have given an indication
9 that they are no longer interested in pursuing this
10 type of purpose, then they would be free to leave.

11 THE CHAIRMAN: This would be detention
12 for a definite period, or ---

13 MR. NORMAN: Well, if they left, they
14 would be charged for the original offence. They
15 would not be charged while they were in the detention
16 centre, it would be voluntary.

17 THE CHAIRMAN: What is your impression
18 of the extent of use of marijuana today, in Canada?
19 What is your assumption concerning the extent?

20 MR. NORMAN: I can only go by what you
21 have in your report. It is very substantial,
22 especially in universities.

23 THE CHAIRMAN: Do you really think
24 that this view represents the majority of Canadians?

25 MR. NORMAN: Yes.

26 THE CHAIRMAN: Five years minimum
27 imprisonment for the use of marijuana?

28 MR. NORMAN: I think you are distorting
29 what I said.

30 THE CHAIRMAN: No, I'm just repeating

1 what you said. Is that not what you said: a minimum
2 prison sentence of five years for possession of
3 marijuana, or detention, definite detention, and the
4 person is ---

5 MR. NORMAN: I think it is the opinion
6 of the majority of Canadians that this use of drugs
7 has to be contained. It is the only way that I can
8 think of that it can be done without being too harsh.

9 THE CHAIRMAN: Do you feel that the
10 fact that it has continued to spread despite the
11 present law is because the law is not severe enough?
12 Is that what your assumption is?

13 MR. NORMAN:

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1 DR. LEHMANN: How would you suggest
2 that one could sort out when these children would
3 be ready to go back into society without being a
4 threat to others by again taking drugs?

5 MR. NORMAN: That would be subjective.
6 It is not an easy problem, I admit, but, having
7 been caught once and knowing that the next time
8 around they would get a much more severe penalty,
9 there would be no opportunity for them to go through
10 this, they would be jailed.

11 DR. LEHMANN: But there again, you have
12 the full force of a harsh deterrent which you just
13 said should not be applied.

14 MR. NORMAN: Well, this is the second
15 time. I think that it would be possible to get a
16 pretty good idea of the attitude.

17 THE CHAIRMAN: I take it that the
18 detention centre and the threat of imprisonment, if
19 he does not sort himself out, is to be a coercive
20 measure, the deterrent, the fear of ultimate im-
21 prisonment?

22 MR. NORMAN: I imagine I would have
23 to agree with you.

24 PROFESSOR BERTRAND: There is a principle
25 in law enforcement, in criminology which goes like
26 this, and which is taken from Modestu and LeCarrier,
27 that the certainty of repression is much more
28 effective than the severity of sanctions. How would
29 you respond to that, the very fact that if a person
30 commits a crime he is sure, in seventy percent, at

1 least, that he will become noticed to the law enforce-
2 which
3 ment officers/is more effective in his beoming a
4 law-abiding citizen than the severity of sanction.
5 And to prove this, let me just refer briefly to three
6 pieces of research that have been done, one in Pennsyl-
7 vania, two in Europe, on the effect of capital
8 punishment and the ineffective results -- well, the
9 fact that there was capital punishment in some areas
10 has shown no decrease in the crimes for which capital
11 punishment was applied. So, how would you respond
12 to that? Would you still feel that a very severe
13 sanction is more effective?

14 MR. NORMAN: This five years is a back
15 up. I think that the fact that there would be no
16 jail term, the fact that they might only be in six
17 weeks or so, would make it much more possible to get
18 the information from these people -- the associates
19 of a child who will destroy himself on drugs will be
20 likely to inform people that this was happening.

21 THE CHAIRMAN: Gentleman at the micro-
22 phone?

23 THE PUBLIC: You speak very harshly
24 for a person who has got three children, and I don't
25 know how old your children are, but what would you
26 do if one of them got busted? Would he go away
27 for five years?

28 MR. NORMAN: You have heard of the
29 detention centre or the quarantine centre, away
30 from the other children.

 THE CHAIRMAN: Well, what is to happen

1 in this quarantine centre. Is this just detention
2 is
or/some influence to be brought to bear, or remedial ---

3 MR. NORMAN: It would be more like a
4 hospital than a prison.

5 THE PUBLIC: Groovy!

6 THE CHAIRMAN: What do you think of
7 the condition of the child who takes marijuana?
8 Is his condition amenable to something that you
9 would call treatment? What is the treatment that
10 is indicated?

11 MR. NORMAN: I don't know.

12 THE CHAIRMAN: You don't know. Do you
13 assume there is such a treatment?

14 MR. NORMAN: I assume there is such a
15 treatment.

16 MR. CAMPBELL: One of the advantages
17 of this quarantine would be the isolation of the
18 child from persons advocating drug use or other
19 persons using drugs?

20 MR. NORMAN: No, I did not mean that.
21 I meant isolation from society so that -- it is a
22 contagious disease.

23 MR. CAMPBELL: Would you feel that
24 there would be a risk within this sort of situation
25 where presumably you have 100% of the peer influence,
26 at least, from people who have a drug experience, that
27 would be, potentially, a very intensive thing in
28 connection with drug use?

29 MR. NORMAN: I think so. I'm afraid
30 you might be right, but there are groups of people

1 now that are very active, who have been on drugs
2 and who recognize the dangers, who are pretty active
3 in the education of the young, and I think that you
4 could have people/who would have a good influence.

5 MR. CAMPBELL: To go back to your brief,
6 one of the early statements that you make is that
7 there is no connection between the use of alcohol
8 and the drug culture that contains the use of cannabis
9 and acid and so on. You are attempting to say, I
10 think, that there was an influence born of the
11 observation by the young of drug use in society,
12 that alcohol is a powerful, dangerous drug, power
13 reducing and so on, and implying here a type of
14 implication. I wonder why you discount so totally
15 the adult use of alcohol as a causing factor in
16 another form of drug use by another generation?

17 MR. NORMAN: Well, it hasn't happened
18 before. We have had alcohol for generations and
19 generations.

20 MR. CAMPBELL: Then you think in the
21 observation ---

22 MR. NORMAN: I think in the observa-
23 tion I didn't get involved with any other drugs
24 because my father wasn't involved with alcohol nor
25 did he because his father wasn't.

26 THE CHAIRMAN: Gentleman at the micro-
27 phone?

28 THE PUBLIC: Sir, I don't smoke
29 marijuana, but I have a friend and he does. And
30 he told me one day that he has no desire to subvert

1 society. The only problem that he found was that
2 he didn't want society to subvert him. So, he sits
3 back and does very little, and considering he is
4 so passive, he finds it hard to consider himself
5 so dangerous, and he can't figure it out. That's
6 his whole problem; he just can't figure it out.
7 He doesn't know why, he just sits back and does it
8 and he tells me that he does it too.

9 MR. NORMAN: It's not dangerous --
10 it is the existence of the availability of the drug
11 which is dangerous.

12 THE PUBLIC: Sir, they passed laws a
13 long time ago because people thought that the drug
14 was dangerous, and the only problem being is that
15 now people are using it more than ever before. And
16 to discount the fact that those people that are using
17 it, that they have minds to decide for themselves,
18 that they are deriving some benefit, or that they
19 are using it for simple pleasure, or whatever their
20 reasons, that to discount the fact that they can
21 think better for themselves -- it is a pretty serious
22 thing to think that there are about a million people
23 in Canada who, you know, find nothing wrong with it.
24 Not to deny that there are people who have problems
25 with it.

26 MR. NORMAN: I don't discount the fact
27 that you can decide for yourself, but I do dispute
28 the fact that a fourteen or fifteen year old child
29 can decide for himself.

30 THE PUBLIC: Well, my friend started

1 smoking when he was fourteen.

2 THE CHAIRMAN: Gentleman at the micro-
3 phone?

4 MR. STEIN: Can I just ask one question
5 of the gentleman before ---

6 Are you directing your recommendations
7 then to the age group under seventeen? Is this the
8 group that you feel should be detained or quarantined;
9 or do you feel that this should apply also to the
10 twenty-four to thirty year old user?

11 MR. NORMAN: I'm concerned about those
12 under eighteen. But I don't see any alternative
13 then to eliminate the availability of the drug
14 altogether to protect those children.

15 THE CHAIRMAN: But how will we eliminate
16 the availability of a drug altogether by attempting
17 to put the children in detention centres for marijuana
18 users? Will the drug not be available when they come
19 out?

20 MR. NORMAN: No, not if the restrictions
21 are effective. It's been done before. I think this
22 attitude that nothing can be done is ridiculous.

23 THE CHAIRMAN: Well, when you say
24 a restriction factor, we know that trafficking --
25 the enforcement against trafficking is only relevant
26 to trafficking at all. That's a conclusion that
27 we have from the existing availability of the drug.
28 So that, how does your severity for possession and
29 use -- do you think it's going to -- how is it going
30 to affect the availability that these children will

1 be exposed to when they come out of the quarantine?

2 MR. NORMAN: Well, it depends, of
3 course, where they got it.

4 THE CHAIRMAN: Oh, I see, you con-
5 template the quarantine as a means of getting
6 information out of the children which will aid in
7 repressing the trafficking?

8 MR. NORMAN: I wouldn't use those
9 terms, but, yes.

10 THE CHAIRMAN: Why wouldn't you use
11 the terms if that's what you mean, if that's what
12 you're contemplating?

13 MR. NORMAN: All right.

14 MR. CAMPBELL: Is the giving of the
15 names a necessary condition of this?

16 MR. NORMAN: No. I'm not attempting --
17 I would say so -- but I'm not attempting to draft
18 the law here.

19 THE CHAIRMAN: Gentleman at the micro-
20 phone?

21 THE PUBLIC: It's really difficult for
22 me to believe that you're serious in all this, or
23 pretend you are.

24 MR. NORMAN: Sir, most people who are
25 concerned are serious.

26 THE PUBLIC: Oh. You can lock me up
27 for twenty years and I'm still going to smoke, and
28 I don't know anybody who has come out of jail yet
29 for possession or trafficking who has quit smoking.
30 You know, Fascist tactics aren't going to put marijuana

1 or any other drugs down.

2 THE CHAIRMAN: Gentleman at the micro-
3 phone?

4 THE PUBLIC: Sir, I would just like to
5 point out one fact about this evil that you speak of
6 so harshly, that has infiltrated our pure society.
7 The only crime involved is the crime that one has to
8 pay such a high price to obtain the stuff that he is
9 using.

10 DR. LEHMANN: You have mentioned that
11 it has been done before, Mr. Norman.

12 MR. NORMAN: Well, marijuana was
13 becoming quite prevalent before the war, and it was
14 placed on the narcotics list and it was surely very
15 effective.

16 MR. CAMPBELL: What was the difference,
17 do you feel, Mr. Norman, in the era prior to the war,
18 when you say it did occur, and this period at the
19 late sixties?

20 MR. NORMAN: We are getting into
21 something which I am really not ready to discuss.
22 But someone mentioned that the Depression was a
23 pretty effective challenge for people who lived in
24 that time, and certainly, as many people have said,
25 the young people have no challenges, they have a
26 very, very soft life, and they said a war or a
27 depression would probably cure that. That was one
28 of the reasons ---

29 DR. LEHMANN: For affluence?

30 THE CHAIRMAN: Gentleman at the micro-

1 | phone?

2 | THE PUBLIC: I'm a little young and
3 | I'm a bit confused. When you first came on you
4 | started -- you said that you could see no reason
5 | why they should drag alcohol in with drugs. I con-
6 | sider them both sort of an escapism. But I guess I
7 | understood why you said that, because, like you said,
8 | your grandfather drank, your father drank, and
9 | suppose you drank. And so -- well, you wouldn't want
10 | anyone, you know, to escape from alcohol and be put
11 | away for a minimum for five years as an escape from
12 | cannabis.

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1 So, like I say, I'm a little bit confused.

2 If you take all the people who smoke
3 marijuana and you put them away for five years then
4 you should take all the alcoholics and put they away
5 for five years. Then you should take all the escapists
6 and put them away for five years, and, you know,
7 really cure the people -- I mean, not cure, but treat
8 the people who have a disease, put them in a colony.
9 I say this facetiously, by the way. Put them in a
10 colony and don't work on the cure, don't work on what
11 is causing it, and try to change the system that
12 is causing it, which I think destroys the complete
13 social structure, and what, I guess, we are discussing,
14 the education of it. So, well, I've been standing
15 up here talking -- thank you.

16 THE CHAIRMAN: Thank you.

17 MR. CAMPBELL: Mr. Norman, you
18 mentioned the fact that war and depression might well
19 alleviate this phenomenon. But I think in the
20 context of our earlier discussion this morning,
21 perhaps there is a concern in the society of what
22 might be the moral equivalent of war or moral
23 equivalent of depression by way of giving the --
24 could you suggest to us the thrusts or moves that
25 society could make to apply this to the prevention?

26 MR. NORMAN: I could only say that I
27 don't have any problem finding challenges. I find
28 that Canada is an extremely exciting place to be.
29 There is a fantastic amount of things to do. There
30 are frontiers to be pushed back, and certainly Canada

1 is one of the most exciting places to be.

2 MR. CAMPBELL: Well, I think it is
3 exciting too. But I think what you do or I do is
4 not the important thing. The important thing is
5 these people who say they don't. Like you, I find
6 that I am concerned for a number of people who say
7 they don't. And how can you move -- neither of us
8 are going to advocate war, neither of us are going
9 to advocate depression. What can be the equivalent?

10 MR. NORMAN: I don't know. Certainly
11 turning on is not going to help them. Certainly,
12 there are some pretty drastic changes needed in our
13 education situation, but there are people better
14 qualified to talk about that than myself. I just
15 want to express the fact that I don't like
16 acceptance of the existence of this culture.

17 And there is a concern, a pretty
18 serious concern of the majority of parents anywhere
19 in Canada about this thing, and the availability
20 has to be, some way or other, the availability has
21 to be curtained.

22 THE CHAIRMAN: Gentleman at the micro-
23 phone?

24 THE PUBLIC: Sir, I don't want to
25 belittle your very real concern and relevancy. I
26 would like to confine my comments to your proposed
27 solution to a main social problem: "Man who stand
28 on detinator, only make foot disappear."

29 THE CHAIRMAN: I didn't hear that.
30 What was the last part? What did you say?

1 THE PUBLIC: I'm not sure it merits
2 repetition. "Man who stand on detinator, only make
3 foot disappear."

4 THE PUBLIC: I think the gentleman over
5 there ---

6 THE PUBLIC: I would ask the gentleman,
7 why does he think marijuana, or rather, using mari-
8 juana leads to other drugs? Is it the marijuana
9 itself or is it the one who uses marijuana?

10 MR. NORMAN: Well, you might have a
11 question there, but I'm not prepared to take a
12 chance on this intellectual experiment with the whole
13 country. In the interim report you mention several
14 cases that something like half the people who use
15 marijuana use other drugs. If it was not for that,
16 then quite possibly it would be practical to legalize
17 marijuana. I said that marijuana leads, in more
18 cases than not, to the use of more dangerous drugs.
19 Therefore, it has to be considered with the whole
20 group of drugs.

21 Now, whether legalizing marijuana will
22 put it in the same bracket as alcohol, it would not
23 lead to the use of these other drugs, that just may
24 be, but I rather doubt it. It is an experiment which
25 I am not prepared to see taken.

26 THE CHAIRMAN: Gentleman at the micro-
27 phone?

28 THE PUBLIC: I would just like to ask
29 you one question. You said that the majority of
30 Canadians are very concerned about this problem, and

1 that their stand is the same as yours. I was wondering,
2 where are they? You said they are not vocal. If they
3 are not vocal, how do you know that they are concerned?

4 MR. NORMAN: I would like to know where
5 they all are too.

6 THE PUBLIC: Granted. But, also, do we
7 have to kill to be saved? You said the war -- which
8 sort of made the decisions -- let us know who we are
9 and what we stand for and what to fight for. Is that
10 necessary? Do we have to experience shell-shock to
11 find out if marijuana is good or bad?

12 MR. NORMAN: I am not seriously suggesting
13 we go to war.

14 THE PUBLIC: I thought you said that.
15 I may be mistaken.

16 MR. NORMAN: In spite of the fact that
17 somebody here called me a Fascist, I do not know.

18 THE CHAIRMAN: In a few moments, I'm
19 going to recommend lunch. We will resume at two
20 o'clock.

21 Gentleman at the microphone.

22 THE PUBLIC: If I could just speak before
23 lunch. It would seem that Canadian society is a
24 different thing, but there ^{are a} lot of people who happen
25 to like living here and who are going to continue
26 to live here, and as long as they don't lock me up
27 for five years in the next five minutes I 'm going to
28 live in Canada, and a funny thing is going to happen,
29 in the next year or so, maybe five years; I'm going
30 to have children. Now, these children ---

1 THE CHAIRMAN: What is so funny about
2 that?

3 THE PUBLIC: These children are going
4 to be free to decide for themselves, and I'm going
5 to be a parent who is not going to be concerned
6 about whether they are using drugs or not. You can
7 talk about parents' concern, but people, I guess,
8 who are at this age and might want to use drugs
9 already, are going to be the new parents. They will
10 be the next generation if they are not already. Their
11 children will be able to use drugs freely because
12 their parents are not going to stop them.

13 MR. NORMAN: It is people like him who
14 should be locked up.

15 THE PUBLIC: With respect to your
16 reference to alcohol, your grandfather used it and
17 your father used it. Your son is going to say that
18 "Maybe my grandfather used it", because I know a
19 lot of parents who are turning on these days. Why
20 not? What do you think the Arabs say? My father used
21 it, my grandfather used it, my great-grandfather used
22 it.

23 MR. NORMAN: You can go to Algeria if
24 you like.

25 THE CHAIRMAN: I would like to adjourn
26 now and we will reconvene here at two o'clock.

27
28 --- Upon adjourning at 12:10 p.m.

29

30

1 --- Upon resuming at 2:00 p.m.

2 THE CHAIRMAN: Ladies and gentlemen,
3 we will resume our hearing now.

4 I call on Mr. Israel Lyon, who is
5 President of the University of Manitoba Students'
6 Union. I'm not sure whether Mr. Lyon is appearing
7 in a representative capacity or speaking for himself.

8 Would you like to be seated at the
9 table, Mr. Lyon? I'm sorry -- over here, please.
10 Please be seated and introduce your colleague.

11 MR. LYON: My name is Israel Lyon and
12 I am President of the University of Manitoba. All
13 the comments that I will be making -- President of
14 the University of Manitoba Students' Union.

15 THE CHAIRMAN: Well, one never knows.

16 MR. LYON: All the comments that I
17 would like to make are personal, and I am going
18 through the whole drug phenomenon as a personal
19 experience.

20 My colleague is Joel Kositsky. He
21 works for the Students' Union.

22 THE CHAIRMAN: I would like to get his
23 name.

24 MR. LYON: Joel Kositsky.

25 THE CHAIRMAN: How do you spell that
26 please?

27 MR. KOSITSKY: K-o-s-i-t-s-k-y.

28 THE CHAIRMAN: Thank you. Excuse me,
29 go right on, please.

30 MR. LYON: Yes. I am going to be using

1 the speech by the Honourable John Munro at Vernon,
2 British Columbia to the British Columbia Medical
3 Association as a standard, more or less to comment
4 on some of the assumptions, and some of the premises
5 he uses.

6 The first thing I would like to mention
7 as far as the Students' Union is concerned, we had
8 a referendum on the legalization of cannabis. This
9 was part of the national poll. The turn-out was very
10 poor, only about 70%, but out of that, two-thirds
11 voted in favour of the legalization. I believe this
12 was more or less the same result all across Canada
13 on the various campuses. The now defunct Canadian
14 Union of Students has come on strongly many times
15 for legalization of marijuana; so has the western
16 caucus of student unions. Okay, now into Mr. Munro's
17 speech.

18 On his first page, he is talking about
19 from what backgrounds users of marijuana and other
20 drugs come from. And he talks about drugs relating
21 all the way from heroin, sleeping pills, to alcohol.
22 I feel the first point, which is important to bring
23 up is the point of alienation that drug -- well,
24 law enforcement brings out. A lot of people,
25 especially among kids today, feel that they are
26 more or less being discriminated against because
27 many people are using drugs from all walks of life,
28 all the way from the executives to businessmen, to
29 your "hippie", or your "nine-to-five" patron. And
30 because the youth are the only recognizable group of

1 people who can be branded as users, they are the only
2 ones being arrested.

3 I feel that this is really breaking
4 down any respect for authority, and especially for
5 the police force.

6 Now, Mr. Munro goes into the various
7 types of users. He uses the words, "old college
8 tradition of seasonal beer glass", and then, as one
9 type of user who just wants to get a line because
10 it's cheaper than liquor. And then he goes into
11 people who are trying to find new insights into their
12 own minds and personalities. And then he quotes,
13 "Freud was a user of cocaine", and then he says,
14 "He was trying to get an insight into artistic
15 creativity." And he cites the example of (inaudible)

16 Now, I feel that those three of the
17 full list, are probably the most numerous in terms
18 of those who, you know, are just interested in getting
19 high, and in another era will be using beer or getting
20 an insight or escaping from the rat race, and this
21 sort of thing, or trying to become more aware and
22 more sensitive to their environment.

23 I think Mr. Munro in his speech is
24 emphasizing too much the drug cult. He uses -- well,
25 "some high priests, psychedelia, attempt to transform
26 the usage into a new form of religion." And I feel
27 all through his speech he is degrading -- there is
28 an over-emphasizing this part of the drug culture.

29 Then he makes the comment, "After all,
30 the best way to make sure that a law is followed is

1 to (inaudible) people not to break it."

2 Well, as the Commission has stated,
3 a lot of people are, you know, basically questioning
4 the law, and I feel, of the group of speeches, Mr. Munro
5 is saying that because it is a law it is good, and
6 therefore it has to be kept and protected. And I feel
7 that Mr. Munro in his speech, has branded all kinds
8 of drug users, even the most casual drug users, as
9 criminals, as having some kind of sickness that must
10 be treated. And I feel that many youth are challenging
11 this basic premise. All through Mr. Munro's speech
12 he says that there is something basically wrong with
13 using drugs. And I think this can be challenged.

14 Then, Mr. Munro uses the phrase of,
15 "We have to help them maximize their potential as
16 constructive citizens and human beings." I think
17 even the vocabulary he uses shows how vastly different
18 an outlook of social values many youth have with
19 present day norms. This is constant emphasis on
20 constructive activity, being a stable member of
21 society, being, you know, of going to be seventy,
22 this type of thing. One must produce, one must be
23 stable, one must do something. And it is impossible
24 to use those standards to judge people who are using
25 drugs now.

26 People are -- your "drug user" is trying
27 to set his own standards, his own morals, and aren't
28 interested in producing and getting, you know, a
29 gross national product. And you can't use those
30 standards to judge the worthwhileness of a person

1 using drugs.

2 Again, all through the speech, he says
3 that if you are not producing you are not of benefit
4 to society, and, in fact, you are holding the whole
5 society down with you. And, you can't use that
6 type of language to discuss the whole drug phenomenon,
7 for what people are trying to get out of it.

8 I feel many people see the present
9 day society as a treadmill, as a rat race and they
10 are trying to get a whole new perspective on that,
11 trying to sort of step out of that and view the
12 whole thing, and given time to look at it with
13 retrospective. And therefore, it is impossible to
14 talk about drug users as being a stable member of
15 society, to progress to big and better things.

16 Okay, then Mr. Munro goes on -- well,
17 he uses three basic premises. First, "Not all drug
18 use results in social chaos and personal destruction
19 for the user." Second, his point that "drug use is
20 a negative rather than positive step in both
21 personal and social evolution." Third, "Any drug
22 is dangerous if it is abused." Okay, you know, the
23 first one, obviously, can be accepted. That is, drug
24 use won't result in social chaos and destruction.
25 Now, the question comes in here, how responsible is
26 society as a whole to the conduct of an individual,
27 what the individual does to himself? The government
28 has, more or less, come out with the statement that
29 the government does not belong in the bedrooms of
30 the nation. And now we ask, does the government

1 belong in the drug use of the nation if the person
2 is fully informed of the potential reactions to
3 drugs? Does the government have the right to say,
4 "You as an individual are not responsible enough to
5 make the decision to take drugs, or not to take drugs."
6 This gets into the whole Protestant ethic of, can
7 the individual trusted, are individuals basically
8 good or must they be socialized and restricted for
9 their own good? We can't argue that now, but a lot
10 of people are challenging this.

11 The second point, I would fight
12 wholeheartedly -- that drug use is a negative rather
13 than a positive step. There are many people who
14 would say that drug use is a very positive thing,
15 that it gives them time to do things and a clear
16 and new perspective, that they are more aware of
17 things, that they realize how beautiful the world
18 can be. As an example, in your interim report you
19 have a letter from a fifty-one year old professional
20 about how fantastic the world seemed to be now that
21 he took drugs, and saw it not as a constant race
22 against time. He had a better home life, and
23 relates to his children better. And a lot of people
24 feel this way.

25 The third point -- that drug use can
26 be abuse, that is true. Too much poker, too
27 much golf, too much TV, you know, is dangerous.
28 But this again boils down to "How much can you trust
29 an individual?"

30 Okay, then there is -- Mr. Munro, when

1 he elaborates on the second point, he uses the term,
2 "artificial paradise" for drugs, and it is escaping
3 from the real world. What is artificial and what
4 isn't? When a person flies to Florida from Winnipeg
5 in the winter, is that not artificial? Is television
6 not an artificial phenomenon? As far as I am concerned
7 anything that one perceives is a real and honest
8 experience, no matter how it is induced. If a
9 person is hypnotized and the hypnotist says, "You
10 are feeling such and such a sensation," he immediately
11 feels that sensation. I feel that the term "artificial
12 paradise" is used very arbitrarily by Mr. Munro and
13 other people who say that people are escaping when
14 they are using drugs. When people run off for a
15 vacation, aren't they escaping? Isn't that an
16 artificial situation relative to their daily life,
17 to their office?

18 Then, Mr. Munro goes on to show how --
19 well, he tries to show that drugs never do anyone
20 any good. For example, he uses China; he uses the
21 phrase, "Peyote failed to recapture the western
22 plains for Sitting Bull, and hashish has certainly
23 not led to the revival of the high level of the
24 ancient agriculture in the Middle East."

25 And then he uses the example of the
26 opium in China. The question is, what is the cause
27 and what is the effect? I think peyote has nothing
28 to do with ownership of land. The Indians had no
29 conception of any individual owning the land, and
30 with China, drugs only became a problem when China

1 was under attack by western powers. It was a very
2 stable society before they were, you know, brought
3 into contact with the outside world.

4 Then, Mr. Munro goes on to say, "Basi-
5 cally, parents are setting a bad example for the kids."
6 He ~~quotes~~ the Rolling Stones. I will just read
7 it out, "... "What a drag it is getting on, kids are
8 different today. I hear every mother say, 'Mother
9 needs something today to calm her down', and though
10 she is not really ill, there is a little yellow pill
11 ~~and~~ ^{her} she goes running for the shelter, of/ mother's little
12 helper, and it helps her on the way, gets her through
13 the busy day, and it helps her through the night, it
14 helps to minimize her plight, life is just too hard
15 today. I hear every mother say, 'They just don't
16 appreciate that you get tired,' and if you take more
17 of those you will get an overdose; no more running
18 for the shelter of mother's little helper."

19 Now, the question is, how could society
20 or the government on one hand say it is all right
21 for people to take their pep pills, their tranquil-
22 lizers, Excedrin; and on the other hand say to the
23 youth, "No, you can't have yours, you can't have
24 your hashish, you can't have your marijuana." A lot
25 of people feel that it is not so much drug use that
26 the government is attacking, but it is the new life-
27 style, the new moral standards that the government
28 is attacking. Here is a life-style that is challenging
29 some very basic morals and standards of western
30 society, and they are using drugs as an excuse to try

1 to break down this culture before it happens, before
2 it gets too strong.

3 MR. STEIN: Are you saying that the
4 use of the drugs by young people is relaxed now.
5 It sounded to me like you were arguing that the use
6 of these drugs is very much like the use of adult
7 drugs, so why do you object? In the next breath
8 you say it is some kind of new life-style. I don't
9 quite get it.

10 MR. LYON: No, I said that the use of
11 marijuana and hashish are part of the youth culture
12 but that the most important thing about the youth
13 culture is some of the moral standards and social
14 standards coming out.

15 MR. STEIN: Is the use of the drugs
16 not significant to that culture? It is in fact a
17 continuation of the old culture? Would you say that?
18 It is, in effect, a parallel form of affirming what
19 the old culture affirms; mainly, drug use.

20 MR. LYON: Probably.

21 MR. STEIN: So the drug use is relevant
22 to the youth culture.

23 MR. LYON: No, I think a lot of the
24 kids think that it is important for what it is being
25 used for, the reason why it is being used; not so
26 much as a treatment to overcome the anxieties and
27 frustrations of the rat race, but just try to
28 experience more the world, try to experience one's
29 self-awareness. I don't feel that you can say that
30 drugs are an essential pillar of the youth culture.

1 MR. CAMPBELL: You made the statement
2 earlier, Mr. Lyon, that you felt that people -- that
3 all experience is to be valued equally, honest,
4 sincere experience. You laid a very heavy stress
5 on the words, "honesty" and "sincerity", vis a vis
6 experience. Would you not use other criteria in
7 evaluating experience, the worth of experience?

8 MR. LYON: Okay, but then you come
9 into the problem of on what criteria you classify
10 your experiences in life.

11 MR. CAMPBELL: What criteria would you
12 use beyond those laws of sincerity?

13 MR. LYON: Those of personal insight,
14 as far as your relationships to other people, to
15 the world around you, and even with your own mind.

16 MR. CAMPBELL: These are then criteria
17 very much with reference to the individual who has
18 the experience?

19 MR. LYON: Yes.

20 MR. CAMPBELL: To what extent should
21 their effect on others be affected?

22 MR. LYON: Fairly obviously, this has
23 to be limited by the bad effects it could have on
24 other people. If you are not harming other people
25 then, I feel that a person should be free to do
26 whatever he wants to do to himself, if he is given
27 all the information on the possible effects of his
28 actions. But the ultimate decision has to be his
29 own.

30 PROFESSOR BERTRAND: Even if he is very

1 young?

2 MR. LYON: Yes. No. Whose standards
3 are you going to use for age? Is eighteen years on
4 this planet; is that a magic formula to say ---

5 PROFESSOR BERTRAND: I leave it to you
6 to define what is "young".

7 THE CHAIRMAN: You aren't going to make
8 a distinction as to ages?

9 MR. LYON: That is a problem that is
10 very difficult to come up with some pat solution.
11 I don't claim to have that solution. I know people
12 who at ten and eleven could be trusted to take care
13 of themselves, and I know people a lot older who
14 couldn't be trusted.

15 PROFESSOR BERTRAND: But your principle
16 is that a person should be free to decide on using
17 substances that are not going to harm anyone else
18 but themselves? This was the principle?

19 MR. LYON: Yes.

20 PROFESSOR BERTRAND: I see. And you
21 still maintain that there would be no age distinction
22 that you would draw?

23 MR. LYON: At this point I couldn't
24 arbitrarily set some kind of age.

25 Then, Mr. Munro goes into the need for
26 preventative research, primarily medical treatment,
27 long term medical, psychiatric rehabilitation, and
28 then, new kinds of social services. I basically
29 agreed with the points that he was outlining, as far as
30 street clinics, as far as youth orientated clinics

1 that would be able to relate to the stereotyped
2 drug user. The only thing is that ---

3 MR. STEIN: One second. When you say
4 "stereotyped drug user", what -- you seem to think
5 it is an image that has some meaning. What does it
6 mean?

7 MR. LYON: Okay. Your long-haired
8 weirdo, eighteen year old. This is the image that
9 Mr. Munro keeps referring to, and he deals with the
10 treatment and rehabilitation of these people even
11 though I don't agree with him, but again ---

12 MR. STEIN: Wait a minute, you said
13 you did agree with him. You said you agreed with the
14 recommendations that he made about something that
15 had to do with the treatment that you call -- what
16 did you call ---

17 MR. LYON: Stereotyped drug user.

18 MR. STEIN: Stereotyped drug user.

19 MR. LYON: Mr. Munro proposed a program
20 of services for your street people, and I agree that
21 that this type of program should be established,
22 should be maintained. What I do not agree with is
23 that these are the only drug users around, and that
24 he is saying that these are the vast majority of
25 users. What I would like to stress is that there
26 are a lot of average, very clean-cut kids with a lot
27 of curiosity, and who are trying drugs. There are
28 a lot of people in their late twenties, early thirties,
29 established executive types, the whole business, who
30 are using drugs. It is not in the limelight and they

1 don't get in the news. People fail to realize that
2 they are a significant part of the population which
3 uses these drugs.

4 THE CHAIRMAN: But with reference to
5 the program that you are referring to, what dis-
6 tinguishes them from the drug user for which you think
7 the program is suitable. Is it a matter of dress
8 or social status, or occupation, or -- what does
9 it do with the nature of drug use?

10 MR. LYON: I'm not quite sure ---

11 THE CHAIRMAN: You refer to a program.
12 You said you do not know yet what program is being
13 advocated but you say it's a program applied to a
14 certain type of drug user, a stereotyped drug user,
15 which you described in a certain way, and now you
16 speak of other drug users, making allusion to their
17 general way of life. What is it that distinguishes
18 the group for which you think the program, yet to
19 be defined, is appropriate, from the other drug
20 users that you have just been referring to?

21 MR. LYON: The basic difference, I think,
22 is their resources, financial or otherwise. For the
23 sake of simplicity, call one group street people
24 and the other executives, or your college kid. They
25 can go to their own private doctors and they can
26 get treatment from standard institutions, whereas
27 your street people don't have the financial resources
28 and maybe they don't have a family doctor they can
29 go to

30 THE CHAIRMAN: You are talking, in other

1 words, about the kind of facility and accessibility
2 to facility that is required by certain drug users?
3 You are not making distinction as to their respective
4 needs for treatment?

5 MR. LYON: No, I imagine the facility
6 is available. I think it is a recognized fact that
7 because possession and trafficking are still an
8 offence, that there is quite a bit of paranoia within
9 the street culture, or whatever you want to call it,
10 and I think there is a very definite need for a
11 street clinic, manned by people who can -- I hate to
12 use stereotypes -- but who can relate to these
13 people, and attract them in without scaring them
14 that they will have their names and numbers taken
15 down and it will be turned in.

16 I don't think it is necessary to go
17 into the details of Mr. Munro's proposal for treat-
18 ment and rehabilitation. I suppose you have access
19 to his speech. I have it if you want it.

20 The last point that I would like to
21 make is that alienation is caused by possession still
22 being illegal. Just recently, within Winnipeg,
23 approximately forty people were busted. This was
24 the work of an undercover agent who was posing as
25 a lead singer in a band. This one incident would
26 probably do more to break down any kind of relation-
27 ship between youth and authorities and police forces
28 in particular. There is a fantastic amount of
29 paranoia going on right now, and the kids in general
30 are very apprehensive about any kind of government

1 body or agency that is trying to do anything for them.

2 I attended a conference on Youth Travel
3 Exchange in Ottawa and the notion came up of I.D.
4 cards to help out hitchhikers, and this was flatly
5 rejected because a lot of people considered this as
6 a ploy for the R.C.M.P. to keep tabs on transient
7 youth and to keep tabs on potential users and traf-
8 fickers in drugs. And this kind of paranoia, I feel,
9 is running around. It is probably the most harmful
10 effect of the drug scene in Canada right now.

11 The only comment I would like to make
12 on the interim report is that it just did not go
13 far enough. A lot of people feel that the points
14 brought up were very good, but the logical extension
15 of the points pro and con legalization of marijuana,
16 would seem to make a very valid move to legalize
17 marijuana.

18 Well, I guess I had better turn it over
19 to Mr. Kositsky.

20 DR. LEHMANN: May I ask you a question?
21 Am I right in understanding that you reject the
22 distinction -- a clear distinction between medical
23 and non-medical use of psychotropic drugs because
24 you, like many others before, who have testified,
25 and have also quoted the little verse about mother's
26 little helper and so on? You seem to take the attitude
27 that if anyone of the straight people can take
28 tranquillizers, "well, then, why shouldn't we take
29 hashish?" The difference that is claimed by society
30 is that tranquillizers in medical use, they are not

1 | considered anything positive. You made it very
2 | clear that you consider drugs are positive; they do
3 | not consider them to be less evil. They consider
4 | not being able to sleep and so on, then they will,
5 | as a remedy, take drugs. But you don't seem to make
6 | this difference. You seem to think that it is all
7 | the same, whether it is to ward off a disease
8 | or a symptom, or whether it is to do it for what-
9 | ever other purposes there are, non-medical.

10 | MR. LYON: Well, I think drugs are here
11 | to stay. It has been a part of our society for a
12 | long time. The problem is, you know, for medical
13 | treatment or just for enjoyment, and what is the
14 | lesser of two evils. You know, I have -- I'm not
15 | going to make a moral judgment on that, of what I
16 | consider wrong. I think it is up to an individual
17 | to decide if he wants to take some kind of medication.

18 | DR. LEHMANN: Yes, but your implication
19 | is that there is a double standard involved, while
20 | others in the society would argue that it is a
21 | double function. The medical function is quite
22 | different from the non-medical, and that the standard
23 | is only one standard. Because if a housewife takes
24 | too many amphetamines, then this is equally disapproved,
25 | like anyone else taking speed.

26 | MR. KOSITSKY: I think that there is
27 | effectively some sort of a double standard as far as
28 | a large section of the adult population; and maybe
29 | some of the kids too, is concerned. Ostensibly,
30 | it is between medical and non-medical drugs, but the

1 reaction that kids, youth groups, street people, get
2 from older people seems to imply that these people,
3 or various people in the adult society, feel that
4 non-medical drugs; we don't classify them as that,
5 are evil, drugs are not to be used, they are other
6 than in themselves a bad thing. They don't recognize,
7 for example, the Commission points this out, for
8 example, that nicotine and cigarettes, alcohol and
9 cigarettes, are also drugs.

10 DR. LEHMANN: And coffee.

11 MR. KOSITSKY: Coffee, tea, etc. This
12 is where I think he was trying to imply that there
13 is a double standard. And public opinion, which is
14 largely a result of what the adult society thinks,
15 is being pushed by this double standard. Essentially,
16 it should just be medical and non-medical, and that
17 would solve a lot of problems. But it is not.

18 DR. LEHMANN: One other question. You
19 took issues with Mr. Munro's speech on the point
20 he made about too much of a drug becomes abuse, and
21 he said too much of anything becomes abuse, for
22 instance television, over-eating and so on. Would
23 you agree that there are differences, that certain
24 activities just -- if too much of it is enjoyed,
25 will lead to more dangerous consequences than others?
26 For instance, taking too much acid will lead to a
27 bad trip and will involve a lot of people and a
28 lot of suffering and a lot of time of other people,
29 while over-eating or too much television hardly will
30 cause a bad trip and will not involve others, and will

1 not lead to dangerous consequences. So, would you
2 accept the argument that drugs, when abused, abused
3 too much, have more dangerous consequences than other
4 things being used?

5 MR. LYON: Yes, but I think we can cite,
6 you know, examples of what seems to be a harmless
7 activity that could lead to fairly bad consequences.
8 Just -- you know, some people are possessed by the
9 urge to go to committee meetings and, how many broken
10 families have resulted because of things of this sort,
11 obsession with committee meetings.

12 DR. LEHMANN: All right. I see.

13 MR. CAMPBELL: You said conduct should
14 take account of its effect on other people as a
15 criterion, and evaluating that comment now, the --
16 I think it is a clear situation, that a great many
17 people in the society, notably a large number of
18 parents, are deeply distressed, deeply anxious, if
19 what they tell me is an honest and sincere statement,
20 their lives are being profoundly -- I think, from
21 what they say, in some instances, tragically affected
22 by the behaviour of their offspring in using drugs.

23 To what extent do you think the
24 adolescent should take account of the reaction, or
25 the effect on the parent, of his conduct?

26 MR. KOSITSKY: I would like to just
27 add one thing to that. I think part of the stress
28 that is being put on the parents, which is a real
29 thing, is due in part to the very bad publicity, to
30 the out and out lies that have been propagated by the

1 media and governments until recently, and in some
2 cases still, you know, notably the Anslinger Report
3 on marijuana and so forth, the "Killer Drug", "any
4 girl who takes marijuana will sleep with anybody who
5 is around", and I am sure the children -- and you are
6 talking about adolescents, not only those who have
7 reached maturity -- should take into account the
8 feelings of their parents. But I think that the
9 government and society also has its responsibility
10 to these parents, not to build this thing up until
11 it is so fantastically out of proportion as it has
12 been done, you know, time after time; as it has been
13 done with incorrect facts and incorrect education.

14 MR. LYON: There are other examples.
15 Apparently, five kids in Pennsylvania were supposed
16 to have gone blind because they were on an acid trip
17 and they were staring at the sun, but that was
18 propogated as a hoax by someone in the government in
19 Pennsylvania. It was only reported on the back pages
20 of the newspaper. And then statements like, "Heroin
21 deaths in New York triple in the last year", without
22 saying how many numbers were actually involved.

23 MR. CAMPBELL: I take it the substance
24 of your position would be the anxiety of the present
25 is due to the misinformation on the part of the
26 parents, that if they were correctly informed they
27 would not be as anxious as they are.

28 MR. LYON: I think that's very true.

29 MR. KOSITSY: It's, of course, a matter
30 of degree. I still think the parents would be dis-

1 stressed, partly because a large number of them
2 think that drugs are evil and their children are
3 doing naughty things. So, you know, they wouldn't
4 be as distressed if they were put in possession of
5 the correct facts.

6 In my life, for example, my father
7 said that, "Look, I don't think marijuana is bad, but
8 remember, it's against the law. And if I know you
9 were using it, I'd be worried because you could get
10 arrested at any point and thrown into jail for it
11 and jails are really a bad place." So, I think this
12 too could be a part of, you know, a distressing part.
13 If it's taken off the streets. He also said to me --
14 this is the second thing -- he also said he doesn't
15 want me taking marijuana because he said, "Right now
16 who knows where the marijuana is coming from, who
17 knows what's laced in it, how many hands is it going
18 through, what are you getting?" So that, in my
19 particular case, my father would not be distressed
20 at all.

21 If I was taking marijuana, if it was
22 legalized and under control -- I'm not saying this
23 would be true of all parents ---

24 MR. CAMPBELL: Does that apply equally
25 to acid or MDA or speed?

26 MR. KOSITSKY: I think not. But I think if
27 a lot of the paranoia was removed from acid, there
28 would be less bad trips. I think if people got less
29 strychnine in their acid there would be less bad
30 trips, and I think the people who are up-tight about

1 the police coming in -- there would be less bad trips.
2 I think if it were taken out of so much publicity,
3 as being such a crazy, cuckoo, weirdo thing, that
4 depressed lives, because, you know, people like to
5 read about strange things. And if it was given an
6 honest report about what this phenomenon is, taken
7 out of the criminal circles, taken into circles where --
8 the same man who is giving you marijuana or selling
9 you acid is also interested in getting you onto,
10 perhaps, heroin, or is involved in the circles, or,
11 perhaps, who would like to put some strychnine in.
12 Mescaline hasn't been available in Canada as far as
13 I have been able to find out from various analytical
14 laboratories that are involved with these things,
15 for the last four years. But it has been on the
16 streets as such. Where are they getting it?

17 I think a lot of the distress would
18 be taken away if these drugs came under quality
19 supervision, were taken out of the criminal world
20 and did not carry with them penalties of imprisonment.

21 THE CHAIRMAN: Any other comments or
22 statements for these gentlemen?

23 MR. KOSITSKY: Oh, we're not through.

24 THE CHAIRMAN: I'm sorry.

25 MR. KOSITSKY: We're just starting.

26 I would like to say, first of all, that
27 what I am going to say is also my personal view and
28 not necessarily that of Mr. Lyon or any group.

29 For a while we seemed to be getting
30 down to questions of morality, and I think, whereas

1 this has some basis with the individual's ideas,
2 just like religion does, the state isn't going to
3 say, "You can practice this religion, or" You should
4 practice that religion." Morality is something
5 that comes under the jurisdiction of the individual,
6 and if we are going to start arguing whether or not
7 drugs are intrinsically good or evil, or nasty
8 things, then we can be arguing back and forth, you
9 know, with no rational basis to go on. I'd say
10 yes and you'd say no, and so on. So I am going to
11 dismiss for discussion purposes the morality as
12 being, you know, drugs being absolutely good or
13 absolutely evil.

14 And I think the Commission has chosen
15 wisely, because the impression I got from reading
16 the interim report, in concentrating more on the
17 effects a drug has pathologically, the individual
18 harm that it does to society. And I would just like
19 to quote from the Commission's report: "The extent
20 to which any particular drug use is to be deemed
21 to be undesirable, will depend on the relative
22 potential for harm, both personal and social."

23 The Commission later on goes on to
24 talk about Mill's, Hart's and Devlin's. I agree
25 with you very strongly, in agreement with Mill's.
26 I am very sorry to say that the Commission has
27 said, "Yes, we have the right as a state to control
28 substances that you take, regardless of whether
29 they are harmful to a third party."

30 You say here, "We cannot agree with

1 Mill's thesis that the extent of the state's res-
2 ponsibility and permissible interference is to
3 attempt to assure that people are warned of the
4 dangers." Let me go on -- I don't understand this,
5 to quote the example of thalidomide. If Mill's
6 example had been followed, if the mothers who
7 were given thalidomide had been told of the potential
8 dangers it had, which they weren't, that would have
9 been enough. I don't think any mother would have
10 taken thalidomide knowing she was going to give
11 birth to a deformed child. So, the examples are
12 in keeping with the thesis presented.

13 MR. CAMPBELL: If she had chosen
14 not to heed the -- would she have taken it?
15 And it is affecting a second individual, it is
16 affecting her child.

17 MR. KOSITSKY: So therefore, it should
18 not be allowed.

19 THE CHAIRMAN: Excuse me, are you
20 saying -- is the criterion affecting the second
21 individual? That may cover a lot of ground in drug
22 use.

23 MR. KOSITSKY: Well, we have to set
24 the basis on affecting other people. It is like
25 talking. If I am affecting everybody here should
26 I be not allowed to talk. I think that if we say
27 that any activity not go on, on this, that would be
28 harmful to others; the example that he gives, that
29 drunkenness should not be, per se, against the law,
30 however, a drunken policeman on duty should be held

1 for his actions and should be charged. He is
2 doing a great disservice to the public.

3 The fact that he is being drunk is
4 not so important, but the fact that he is drunk
5 while driving would be what I would call harmful
6 to a second or third party. Does that clarify it?

7 THE CHAIRMAN: Well, I was following
8 up your point about the effect on the children.
9 It does not apply only to thalidomide, possibly,
10 but ---

11 MR. KOSITSKY: Well, nicotine and
12 caffeine as well, which break chromosomes, I am
13 told, in a larger incidence than LSD.

14 THE CHAIRMAN: Well, your point is
15 that, where there is some justifiable concern for
16 possible effects on children, then it is the justi-
17 fication for another kind of state interference.
18 Is that your point?

19 MR. KOSITSKY: I do not restrict that
20 to children.

21 THE CHAIRMAN: No.

22 DR. LEHMANN: Still, there is no
23 certainty. A woman, and this is not too far fetched,
24 could well argue, "I want to take thalidomide because
25 it is a better sedative than others for me and I
26 know that there is a certain risk involved, but I
27 don't believe my child will fall into the fifteen
28 or twenty percent. I have a chance that the child
29 will be all right, and therefore, and in any case,
30 it is my child, and I want to have to decide whether

1 I take the risk or not." You would say that she
2 would not have the right to decide?

3 MR. KOSITSKY: That is right. She is
4 directly being a second party to a risk, whether it
5 is a fifteen percent chance or twenty percent chance
6 or five percent chance.

7 DR. LEHMANN: That is, then, again true
8 for anyone who takes acid and has a bad trip.

9 THE CHAIRMAN: Well, every day we are
10 running the risk of orphaning our children by some
11 of the risks we run -- when you are driving; other
12 risks. They are so interdependent, so much of our
13 conduct can have consequences, effects on third
14 parties.

15 MR. KOSITSKY: Okay, so the question
16 is, where do we want to draw the line?

17 THE CHAIRMAN: That is right.

18 MR. KOSITSKY: On what basis are we
19 going to be able to do this? This is the problem
20 for the Commissioners.

21 THE CHAIRMAN: That is right. Coming
22 back to your point about Mill, is the reliance on
23 information alone sufficient discharge of responsi-
24 bility, particularly where we may be involved with
25 people of an age who, because of their age, are not
26 really able, perhaps, to take note of the information
27 or don't have access to it, or might not be impressed
28 by it. Mill himself made this qualification, as we
29 pointed out, about age.

30 MR. KOSITSKY: I would also be tempted

1 to make the qualification as to age, but I'm going
2 to do it in the opposite way as to how Mill did it.
3 I'm going to say that people in the age of maturity,
4 having all of the rights and being of the same peer
5 group as the lawmakers, should have the same choice
6 to decide what they want to do with their own bodies;
7 should be able to make the same moral decisions for
8 themselves. And as far as the people under the age
9 of majority, I don't know.

10 THE CHAIRMAN: Well, here we have --
11 let us postulate a substance which has no medical
12 use so there is no medical reason for making it
13 available. Let us postulate that it has a great
14 potential for harm in the light of the best available
15 opinion.

16 MR. KOSITSKY: For harm to who?

17 THE CHAIRMAN: To any individual who
18 takes it.

19 Then, let us ask ourselves what the
20 duty of the state is in relation to availability of
21 the substance. If we take the position that there
22 is some duty -- you can see that, it is a duty to
23 make information available. Now, do you feel that
24 it is a sufficient discharge of responsibility for
25 the law to make this information widely enough
26 available and sufficiently well communicated, that
27 there is no risk of people acting unwittingly,
28 exposing themselves unwittingly to this harm? Or,
29 if there is a serious potential for harm, should the
30 state not do something about the actual availability

1 of this substance so as to not expose the people
2 unwittingly to running this risk. You lay tremendous
3 reliance on the effectiveness of the information,
4 don't you?

5 MR. KOSITSKY: Yes.

6 THE CHAIRMAN: Is that a realistic
7 reliance? What do we know about the information and
8 the extent of the people who read things and take
9 advantage of the information?

10 MR. KOSITSKY: The only alternative to
11 that would be for some Big Brother up somewhere to
12 make all the decisions for us, which I find very
13 distasteful.

14 THE CHAIRMAN: Well, if we don't think
15 of it in terms of decisions in a general way,
16 affecting every aspect of life; it is a real risk
17 of harm, a trap, if you wish, for those who are not
18 informed that may inadvertently take it. This does
19 not interact with interference in our decisions in
20 life. This is the duty to avoid traps, let us say,
21 or to minimize traps.

22 MR. KOSITSKY: I think as to the extent
23 of that duty, as far as it is the person's own
24 volition to take or not to take that drug, is limited
25 by dispersing material and communicating it to the
26 people, towards the fact that this drug or whatever
27 we are talking about is very dangerous. We could
28 look at another thing. This was my initial reaction
29 when I read through the interim report, and I was
30 very surprised to find that one aspect of non-medical

1 drugs was left completely out of the report, and
2 this was a bias on the part of the Commission, and
3 I saw no reason for it, and it takes not only the
4 individual taking the drug by his own volition, but
5 being given a drug of his own volition. And this is
6 the whole thing of food additives being given to
7 people without them knowing about it, legally. You
8 don't have to put on the bottle that there is caffeine
9 in Coke.

10 THE CHAIRMAN: But our terms of reference
11 are so that we are restricted to mood-modifying or
12 psychotropic drugs.

13 MR. KOSITSKY: I know you are. We
14 checked very strongly into that. I think that if
15 you could not possibly work it in to what you are
16 talking about, then you could certainly make some
17 sort of recommendation that this be looked at.

18 THE CHAIRMAN: You are speaking of the
19 terms of reference now?

20 MR. KOSITSKY: Yes. I'm not accusing
21 the Commission of this. It is written into the
22 Commission.

23 THE CHAIRMAN: But I want to understand
24 your criticism of the terms of reference in this
25 sense. They apply to all psychotropic drugs and
26 substances, all mood-modifying drugs, and you feel
27 that all additives ---

28 MR. KOSITSKY: Non-Medical Use of Drugs
29 is the name of this Commission.

30 THE CHAIRMAN: Are these drugs; these

1 additives?

2 MR. KOSITSKY: They sure are. What do
3 cyclohexanesulphanic acid and
you call / monosodium glutamate?

4 There are ten thousand presently being used in the
5 States and being imported into Canada, and these
6 drugs are being researched by the company that wants
7 to put them out, certainly in a vested interest.
8 Scientists whose jobs are related to the company are
9 the ones who are doing research on these drugs. They
10 are done, in one report, on a hundred rats or so,
11 healthy rats. And people take these drugs. From this
12 they consider the drug to be safe. They give it to
13 the general public sometimes without telling them
14 that it is there.

15 THE CHAIRMAN: Excuse me. I would just
16 like to make a statement now about television.

17 MR. KOSITSKY: I think something could
18 be said about these lights.

19 THE CHAIRMAN: Do you find these lights
20 annoying?

21 Yes. We should not expose you to them.

22 When we started out our hearings we
23 had to make a decision about whether or not -- please
24 don't take pictures for a minute, if you don't mind --
25 we came to a decision that we should not, although
26 it would be interesting to have a televised record,
27 that we should not because we felt that it might be
28 unfair to people present and inhibit discussion
29 because of the nature of the subject matter, and the
30 personal nature of some of the things said to us.

1 Then, sometime last year, after we had had several
2 hearings, it was said to us that as a duty we should
3 allow some public record of the manner in which we
4 are conducting our proceedings, and this argument, we
5 felt, had some force and we agreed to have one of
6 the days of our hearings in Hamilton televised. We
7 gave notice on that fact.

8 It did not seem to inhibit discussion,
9 but since then, since the interim report, it has been
10 said to us that "You are only going to go and make
11 one stop in each province and it is important that
12 as many people as possible should be able to get some
13 impression of the way that discussion is developing."
14 Again, we had misgivings, but we felt that on balance
15 it was, perhaps, in the public interest that people
16 have an opportunity to see discussion. At the same
17 time, we are still concerned that nobody here should
18 be televised against their wishes, and particularly
19 when they are speaking, and we have received co-opera-
20 tion from the beginning about this whole question,
21 they have understood the position and have been
22 scrupulous in respecting our position, and I know
23 this will be the case here.

24 I ask you that if anyone who goes to
25 the microphone to speak, and does not wish to be
26 televised or filmed -- excuse me -- just make a
27 motion like that with your hand. We have had no
28 trouble in this field since we have permitted this.

29 Now, at the moment you find the lights
30 uncomfortable, then I will ask the man to turn off

1 those lights.

2 MR. KOSITSKY: I have no objection as
3 long as I was informed beforehand that something was
4 going to take place, but I was objecting to the fact
5 of the man standing up there and shooting film. If
6 he wants to, he can shoot it.

7 THE PUBLIC: Mr. Chairman, we are only
8 taking a few shots of the material. We are not
9 recording the people; and which we will be doing for
10 the next ten minutes, and then we will take the lights
11 out? Is that acceptable to you, sir?

12 THE CHAIRMAN: Yes, all right. Is that
13 all right?

14 MR. KOSITSKY: If that is acceptable to
15 you.

16 THE CHAIRMAN: All right.

17 Excuse me, we have interrupted you --
18 the train of your thought. Where were we?

19 MR. KOSITSKY: I was talking about the
20 non-medical use of drugs---

21 THE CHAIRMAN: The additives, yes.

22 MR. KOSITSKY: And how it is usually
23 done by vested groups, such as scientists who are
24 hired as part of the company; being done on healthy
25 animals, while these additives are being fed and given
26 to healthy and unhealthy individuals with certain
27 deficiencies and certain conditions without proper
28 notification on the package. Sometime this morning
29 I read on my Kellogg's Cornflakes box, and it said
30 that it had butylated hydroxytoluene . I don't

1 have any idea what that is. Some do not even have
2 it mentioned on the package.

3 These are drugs. These are drugs that
4 have been researched once and have sometimes been
5 researched again by F.D.A.

6 Marijuana now has gone through so many
7 tests, and so many times it has come up again and
8 again and again, and in that thousand year history
9 of India, why is there this bias between psychotropic
10 drugs and other nice drugs? I would like the Com-
11 mission, if they can report directly on this, or
12 look into this directly, to at least formulate some
13 sort of a suggestion that the non-medical use of
14 other drugs, specifically food additives, be made
15 a point of priority for the government. The fact
16 that it is not even mentioned -- there was one little
17 paragraph right at the end about over-the-counter
18 drugs, which also -- I do not know if they are
19 psychotropic or not.

20 THE CHAIRMAN: Yes, those come under
21 the definition proper.

22 MR. KOSITSKY: Yes. But I feel strongly
23 about this and I feel very strongly about the case
24 where a person is administering the drug to himself. He
25 could be given this in a hidden form, sometimes not
26 put on the label, sometimes put on a label, that a
27 person has no clue in the world, even if he wants
28 to know what that word means; the government has not
29 provided any information. So we haven't received
30 any information on butylated hydroxytoluene.

1 One of the reasons people get so dis-
2 tressed, is that they have played up cyclamates --
3 cyclamates were played up for a brief period. Cyclo-
4 mates were on the market in 1950. A test in 1950
5 showed that there was an incidence of one thousand
6 times -- it was in a book by James Turner which I
7 suggest the Commission read, which is called World
8 Peace -- one thousand -- or one hundred times the
9 incidence of cancer and tumours in rats than would
10 ordinarily happen. Nevertheless, the drug was called
11 safe.

12 There was a case cited in which twenty-
13 five percent of births -- there was a twenty-five
14 percent decrease in ^{the}birth of rats, and for the same
15 particular drug, twenty-five percent of deaths in
16 rats and thirty-two percent in dogs, deaths greater
17 than normal, and the drug was called "safe".

18 DR. LEHMANN: One of the reasons why
19 psychotropic drugs are being played up so much is
20 that they produce immediate effects on human behaviour,
21 not relative effects on the rates of tumours in mice
22 or rats.

23 MR. KOSITSKY: One of the things that
24 the Commission has written is that there is very little
25 known about the long term effects of certain drugs
26 such as LSD, cannabis and so forth. Why is it that
27 the effects of kidney diseases, tumours, lung cancer,
28 are less harmful in the eyes of the Commission than
29 possible psychic disturbances within twenty years?
30 What is the difference? One doesn't have to do with

1 the mind, it has to do with the body. In either
2 case, they're going to get a sick individual.

3 DR. LEHMANN: But immediately; the
4 other one is in the future. That's the difference.

5 MR. KOSITSKY: The immediate effects --
6 correct me if I'm wrong -- of marijuana have been
7 studied over and over again, have been observed first
8 hand, and I think, have been written about by the
9 Commission. We know what they are.

10 DR. LEHMANN: We don't know what they
11 are in driving, for instance.

12 MR. KOSITSKY: Do you mean the harmful
13 effects on the individual or the sociological effects?

14 DR. LEHMANN: Well, the influence on
15 the driving performance.

16 THE CHAIRMAN: I wonder where we are
17 going with this? What is the point, in relation
18 to these other drugs that are proved after certain
19 tests by the government?

20 MR. KOSITSKY: I am saying, if anything,
21 the use of self-administered drugs of any kind should
22 come under less stringent tests than a drug which is
23 being put into our food by a third party who doesn't
24 identify what he is putting in, and certainly doesn't
25 publicize it.

26 THE CHAIRMAN: But the whole assumption
27 underlying that is that these are subject to testing,
28 and ultimately to certain requirements and so on.
29 Now, these requirements may be more adequate, or
30 inadequate, they may be in judgment, but there is a

1 government assumption of responsibility, some res-
2 ponsibility for approving them, for intervening upon
3 the basis of certain evidence that they should be
4 withdrawn. So that, why should there be -- why
5 should this similar concern not be evidenced in
6 respect to drugs and substances which do not happen
7 to have either a medical or a food -- nutritional,
8 either medical or nutritional value?

9 MR. KOSITSKY: I'll tell you why. This
10 goes to our controversy before. One is a drug which
11 I am administering to myself.

12 THE CHAIRMAN: What is the significance
13 of that distinction? I don't grasp that?

14 MR. KOSITSKY: The distinction it comes
15 under -- I'm going to read from the interim report.
16 You were talking about Hart's and Mill's essays,
17 and you were talking about a certain kind of harm.
18 "And the reason we want to do this and the values
19 we want to preserve, one of them is self...", as
20 you say, is "self-realization". I don't think a
21 person is free to, you know, to have self-realization
22 if you say, "We don't care what you choose as long
23 as you choose A, B, C, D or E. Pick a card, any
24 card, but not that one."

25 You cannot describe them, you see, in
26 order to preserve it. You cannot limit a man's
27 freedom ---

28 THE CHAIRMAN: Well, should we not then
29 have ---

30 MR. KOSITSKY: You're talking about

1 individuals, not the right versus the second right.

2 THE CHAIRMAN: Do I understand your
3 philosophic position? So long as you can assume
4 complete knowledge, by people of free choice, of
5 the risk, it really doesn't matter how many risks
6 one permits in the society? One should not intervene
7 to^{try}/minimize the risks, the number of risks, so long
8 as one can assume -- which is a very big assumption --
9 full knowledge of the risks, of all the existing
10 risks, by persons capable of exercising judgment?
11 It doesn't matter then, if you make that assumption,
12 it doesn't matter how many risks we have, or how
13 much proliferation of risk there is, the government
14 should stand back and say, "This is a human right of
15 self-realization to choose and run these risks."
16 And maybe the more the better, and the more puzzling
17 the choice is, the more developed will be the per-
18 sonality.

19 MR. KOSITSKY: Perhaps. You^{have}/limited it
20 slightly. I don't say the government should stand
21 back and say, "Here". I think it should have a
22 credible education policy. I think it should publi-
23 cize things which are bad, in a bad light. I think
24 it should -- I would like to have the pamphlets that
25 are available on the drugs that I've seen recently,
26 which came just ten or five years too late. But this
27 is, you know, among the right ideas.

28 You have to say, "This is what the
29 scientific investigation of the drug found. This is
30 what it means. . . Don't decipher the jargon

1 necessarily, but choose for yourself. And these are
2 the risks."

3 MR. STEIN: When you say they came
4 five or ten years too late, for whom? For you, or
5 for everyone?

6 MR. KOSITSKY: No, to stop the credibility
7 gap.

8 MR. STEIN: So, in other words, it's
9 not really necessary at all now; is that what I should
10 assume from that? Why bother, the information is
11 really irrelevant?

12 MR. KOSITSKY: No. I think if it shows,
13 to some young people anyway, that the government is
14 trying at long last to come to grips with the real
15 problem, they are not trying to cloud marijuana in
16 this fog of murder and rape and violence.

17 MR. STEIN: When you say five or ten
18 years too late, I agreed in that comment; do you
19 think it's really irrelevant; is that what you mean?

20 MR. KOSITSKY: No, it's not what I
21 mean. There are degrees of relevancy. It came too
22 late for the dissemination of knowledge to take any
23 effect on whether or not the person was going to use
24 it or not. This is why it came too late, because
25 by the time it came -- I don't know what your
26 statistics are ---

27 MR. STEIN: Which person? You, or the
28 people who have yet to become involved? Who?

29 MR. KOSITSKY: I was going to say for
30 the people who have not yet become involved, this is,

1 perhaps, a good thing.

2 MR. STEIN: Are you interested in them?

3 MR. KOSITSKY: Of course I am. What
4 is your connotation?

5 MR. STEIN: The connotation was that it
6 came too late -- that this was for your own generation,
7 that's what the connotation to me was.

8 MR. KOSITSKY: You drew the wrong
9 connotation, I'm sorry.

10 THE CHAIRMAN: Gentleman at the micro-
11 phone?

12 THE PUBLIC: I noticed the Commission
13 nod in very general agreement a little while back
14 as to its dilemma in trying to decide how society
15 should be determining where to draw the line regarding
16 responsibility, and the need to interfere in the
17 rights of individuals. And I feel I must take issue
18 with the Commission on the way that you apparently,
19 from the interim report, is coming about coming to
20 this conclusion. Or, at least, take issue with
21 four of the members of the Commission, I should say.

22 THE CHAIRMAN: As long as you don't
23 take issue with any nodding you see up here. Don't
24 try to read the nodding. Go ahead, excuse me.

25 THE PUBLIC: I think that the philosophy
26 of a society, and of Canadian society in particular,
27 regarding its law, should not be sought at this stage
28 in the writings of Mill. I am very sorry to differ
29 with you. It seems to me that the philosophy under-
30 lying the law of a country that has been in existence

1 as long as Canada is pretty well summed up in the
2 body of its law, and in the fact that this has a
3 reasonable degree of consistency from one thing to
4 the next, and, if you expect similar things to be
5 treated similarly. And I think a lot of the dis-
6 cussion which has been going on has been pointing
7 out one of these inconsistencies.

8 I cannot think of any other situation
9 where the presumption of guilt, not in an individual
10 manner, but with regard to a whole legal supposition,
11 that is treated in the manner that it is with
12 marijuana. I think your interim report has made
13 it quite clear that there is no reason at this stage
14 to say it is dangerous. You can say categorically
15 that it is not dangerous and you think there is
16 going to be a lot of research required in order to
17 establish that it is not dangerous. It is probably
18 a little difficult to give any kind of intelligent
19 guess, at this stage, I would think, as to how long
20 that research is going to take, as to whether people
21 can wait that long or are prepared to wait that long.
22 And that might be difficult if you are really in a
23 bind. But I can't say that this bind really exists.

24 I think, unless there is some clear
25 demonstration that this case is different, that the
26 Commission -- and I haven't seen it in your report
27 or in any of the things that have been said to you --
28 the presumption must be the same as with any other
29 substance, or any other case that comes up, that
30 unless there is some reasonably clear demonstration

1 that harm is involved and it is sufficiently strong,
2 you don't make laws about it. And if it becomes
3 reasonably strong and if it approaches your border-
4 line, then you have got a difficulty. Then you really
5 have to argue about where this borderline is.

6 But, speaking specifically of cannabis,
7 I don't think that anything that anybody seems to
8 have been able to establish with any reasonableness
9 begins to suggest that there exists a demonstrated
10 case that it is anywhere near anybody's borderline
11 at all. And I just wonder why the Commission ---

12 MR. STEIN: Supposing it were? I'm
13 not sure how carefully you read the Commission's
14 report, but one of the points we have tried to put
15 out on the table for feedback and discussion is the
16 statement we have made that we have great reservations
17 about the possessional offence for any drug, regard-
18 less of harm. Now, what we have been doing in this
19 particular session, and what the conversation has
20 revolved around, has been marijuana. And the impli-
21 cation of what most of you have been saying, as far
22 as I can hear, is that it is relatively harmless,
23 therefore, the law shouldn't apply. But I take it --
24 well, I don't want to take it, I would be interested
25 in knowing from any of you; the gentleman at the
26 table, or the gentleman at the microphone, or anyone
27 in the audience, what your views are of substances
28 which may definitely be harmful. Do you think there
29 should be possessional laws on this?

30 THE PUBLIC: My personal belief regarding

1 this matter is that I don't think it is a suitable
2 subject for criminal law to try and legislate anything
3 regarding the possession of the material. That's my
4 feeling about it. And I'm not certain that you can
5 form a justification from my personal belief or
6 looking at the general legal philosophy underlying
7 Canada. This is why I chose to restrict my remarks
8 to cannabis where there was this very clear dis-
9 tinction, but I don't think anybody has asserted
10 that there is a demonstrated danger, and demonstrated
11 this to anybody's satisfaction, and so that it
12 approaches some reasonable, generally accepted
13 boundary line where the state has to step in. And
14 I am confused as to how the Commission has managed
15 to accept the presumption of guilt that has been broached
16 and seems to be inherent, with the exception of
17 one member of the Commission.

18 THE CHAIRMAN: You mean presumption of
19 guilt in relation to the drug, presumption of adverse
20 effect?

21 THE PUBLIC: That is right.

22 THE CHAIRMAN: Well, I think that one
23 of the things, first of all, we were appointed to
24 inquire into a situation in which there is a state
25 of law, and the question is the extent to which that
26 law should be changed, what situation should be
27 changed, and the implication of such change. I just
28 make that as an observation, I do not draw any con-
29 clusions from it. It may involve a certain per-
30 spective on the problem, but we are not starting from

1 square one.

2 I would like to just make one further
3 observation about what my colleague Mr. Stein was
4 pointing to, and that is that when we talk about
5 philosophy, the Commission has tried to expose, at
6 this stage, its philosophic assumptions, generally
7 speaking, concerning the responsibility or the right
8 of the state to intervene with respect to the sub-
9 stances which allegedly have a potential for harm.
10 So our philosophic assumption is not just focused
11 on the particulars of cannabis.

12 One may have definite conclusions about
13 the conclusions we came to with respect to cannabis,
14 but when we speak in a philosophic discussion, one
15 has to consider this question of the state's right
16 or responsibility. As we suggested, it has to be
17 considered upon the assumption of the substance
18 having a degree of potential for harm. So that is
19 what Mr. Stein is pointing out. So when we come to
20 a meeting of minds of what is the right approach,
21 we have to not postulate what you think, maybe a
22 substance without potential for harm, but we must
23 postulate a substance with a degree of potential for
24 harm, and indeed a degree of potential for harm
25 which raises a real issue in the state of responsibi-
26 lity.

27 MR. KOSITSKY: This is why I draw a
28 distinction, which you may have overlooked. We are
29 talking right now of psychotropic drugs, and we are
30 talking about them as psychotropic drugs. If they

1 also have pathological side effects, we would have
2 to discuss them as pathological drugs.

3 As far as psychotropic drugs are
4 concerned, I think the Commission or anybody, would
5 be at its wits end to try and find what is harmful.

6 MR. STEIN: What is it that you take
7 the word, "psychotropic" to mean? We have a definition.

8 MR. KOSITSKY: I will go along with
9 your definition. I learned the word from your
10 definition.

11 MR. STEIN: I dare not state that.

12 DR. LEHMANN: Altering behaviour and
13 mood consciousness.

14 MR. KOSITSKY: I was looking at it
15 that way and not as to any pathological side effects
16 it might have.

17 MR. STEIN: Not psychedelic, in other
18 words, but mood modifying, which includes aspirin
19 and coffee, and tranquillizers, and heroin and
20 marijuana? That is psychotropic as we understand
21 the word.

22 MR. KOSITSKY: Right. Cigarettes too.

23 MR. STEIN: Right. Pipes.

24 MR. KOSITSKY: As well as psychotropic
25 drugs, if we look at them as being mood altering
26 drugs, something like heroin which has definite
27 pathological effects that go along with it, there
28 are some like acetone, a hallucinogen which has
29 pathological effects; you can see what happens to
30 brain cells. As such, they have to be treated as a

1 different category of drug. They are psychotropic;
2 they are also pathological.

3 However, when you come to just purely
4 psychotropic drugs, where you can't do an autopsy
5 and say, "Yes, this man was taking LSD because I can see
6 that his arteries have deteriorated as a direct
7 cause of LSD", then you cannot come to any sort of
8 reasonable definition of harm except as expressed
9 from a personal view of each of the members of the
10 body defining this harm.

11 MR. STEIN: Could I persist in asking
12 you this question? If we are looking at a drug
13 such as heroin, with which we can say certain things
14 occur physically to the individual, what is your
15 attitude towards the appropriateness of the use of
16 the criminal law for the possession of this kind of
17 drug? Do you think it is appropriate use of criminal
18 law or do you think it is not appropriate use of the
19 criminal law to find the use of this type of clearly
20 defined drug, in terms of its effect on the body,
21 criminal? Is this appropriate or not?

22 MR. KOSITSKY: I think, perhaps, it is
23 criminal in the same sense that homosexuality is
24 criminal. It is antisocial. It is a problem. Heroin
25 is more of a problem.

26 MR. STEIN: Homosexuality is no longer
27 defined as criminal behaviour.

28 MR. KOSITSKY: That is exactly my point.
29 In England, I don't think being a heroin addict is
30 a crime.

1 MR. STEIN: What is your view, that it
2 should not be a matter of criminal law?

3 MR. KOSITSKY: I don't think so. I'm
4 neither a lawyer nor a criminologist. I don't think
5 it should be. I don't think that a jail term will
6 help a heroin addict. If you want to look at the
7 penal system as one of rehabilitation, then we cannot
8 put away a heroin addict and throw him into jail
9 for five years, and he will come out cured.

10 THE CHAIRMAN: We are now talking about
11 the use of heroin. You say that should not be a crime?

12 MR. KOSITSKY: Yes. I think that is
13 relative, isn't it?

14 THE CHAIRMAN: Yes. And what about the
15 trafficking? Would the government be tempted to
16 interfere with the availability of heroin?

17 MR. KOSITSKY: They should certainly
18 attempt it.

19 THE CHAIRMAN: Should they?

20 MR. KOSITSKY: That is a rather hard
21 question to answer. I think that if heroin was taken
22 out of the organized crime, which it seems to be into
23 now, we would have less problems with it. I don't
24 think that the availability of heroin will greatly
25 increase the addicts, just as taking away the death
26 sentence, which we did a couple of years ago in
27 Canada, did greatly increase the number of murders.

28 THE CHAIRMAN: So, your answer to my
29 question, "Should the government interfere with the
30 availability of heroin", I take it that it should make

1 it available itself, so as to take it out of the
2 hands of organized crime.

3 MR. KOSITSKY: Yes.

4 THE CHAIRMAN: Gentleman at the micro-
5 phone?

6 THE PUBLIC: I would just like to
7 comment here, because I think the time is limited,
8 and I will be brief.

9 I have had eighteen years complete
10 involvement with drugs and alcohol, and I mean seven
11 days a week, twenty-four hours a day. During the
12 last week alone, I have had over fifteen people, and
13 that is up to last night, just in one simple area,
14 with barbiturates, completely under the area of
15 normality.

16 I have spent hundreds of hours, not
17 simply two or three, outside the doors of casualty
18 wards over this period of time.

19 What the effects are doing, realistically,
20 I know that it is possible to structure the reason
21 and also to structure the actual facts as to what is
22 taking place. Certainly in the casualty wards
23 of the major hospitals across the cities, the
24 facts should be available.

25 I was in Vancouver, and I will also
26 mention here that I have personal knowledge of drugs
27 in the hard area; eighteen, twenty years ago, I was
28 personally involved in drugs, and since that time
29 I have been completely involved, around the clock,
30 with people, in all phases. And there is nothing --

1 I'm talking for people whose lives right now are
2 being burned out in Winnipeg. And I'm not talking
3 in figures of speech. I could take you to these people,
4 they are ruins of life, and their only reality is
5 drugs. They can get them easier than you can get
6 groceries at the grocery store. These are the drugs
7 that I think you gentlemen are referring to when you
8 speak to the point.

9 Certainly in the drug area, and this
10 takes a tremendous amount of interpretation, but the
11 simple factor that drugs are playing a vital and a
12 very serious part right now in the reality is a fact,
13 and the need at the moment to interpret the area that
14 they are played is a very tragic emergency. As I said
15 earlier, I am not speaking from a point of theory.
16 I am speaking from involvement.

17 There is not a night that goes by that
18 I am not getting phone calls, not only from mothers
19 and fathers but from younger ones. I have been at
20 the casualty ward at the General in St. Boniface,
21 and my face is quite familiar, holding people in my
22 arms, hoping that we could save their lives if we
23 use a stomach pump, on the knowledge that this is
24 related to the potential that drugs can inflict.
25 I know what they can do, personally, and as I have
26 said earlier, I have known at least thirty thousand
27 people in the drug area.

28 One of the things that I would decisively,
29 as I have said earlier, make clear this afternoon
30 to this Commission, is the tragic need. One of the

1 greatest effects that drugs at the moment are having
2 are, not as you people who, in the academic areas still
3 have, positions of decision. There are thousands of
4 people today who are more tragically affected who
5 are not in positions where they have a choice. They
6 generally speaking, are in the welfare areas, or in
7 areas of living that are devoid of normal living
8 conditions. I have mothers with four or five children
9 who, under the O.D. circumstances of drugs, prescrip-
10 tion, normally, are anaesthetized against the reality
11 of their surroundings. The effects on the children
12 are such that I can provide, as I say, the realistic
13 case histories as what is happening to family life
14 and its interpretation and its potential. I have
15 watched family life being torn to shreds, wherein
16 some indication, in the normal areas of living, which
17 must include, certainly, motivations, reason,
18 structure, the ability of various of your drugs;
19 to deviate from this is tragic.

20 I have watched, as I have said, in the
21 early stages of the fifties when your drugs first
22 came in, when in the casualty wards, if you mentioned
23 drugs, the stigma alone was practically enough to
24 drive you out the door. I had to fight the doctors
25 in those wards to get help for these people.

26 I had to structure some of the equip-
27 ment that we have today, tragically short as it is;
28 but I am extremely worried at the moment, and that is
29 the reason that I am here this afternoon, at the
30 effects that are taking place in the area of the

1 barbiturates and tranquillizers, and the freedom that
2 the medical profession itself is actually disposing in
3 these units.

4 One of the common practices in medicine
5 today is simply to use the tranquillizers as a means
6 of simply anaesthetizing a person to the reality at
7 the moment rather than attacking the reality of living,
8 and this is understandable. But today, particularly
9 in the last three years, I can't help but tell you
10 right now that I am extremely concerned, in the general
11 community that are living, at the amount of barbiturates
12 and tranquillizers or what you may name, in particular
13 areas that are available and being used, because,
14 belief me, there is nothing that will cut out communi-
15 cation lines to normal living more quickly than drugs.
16 And this is one of the tragic results, is that these
17 people, and as I said last week and the weeks before
18 that, I have no hope of communicating with these people.
19 The only thing that I can do for them is to hold
20 their hand and offer them sympathy, because under
21 the situation that they are existing in, it is
22 impossible in most cases to communicate with them.
23 They are completely anaesthetized on barbiturates to
24 the extent where, in the course that you find the
25 normal results, they are unable to practically function,
26 let alone speak.

27 I am talking, as I said earlier, of
28 reality. I'm not debating the situation. It would
29 take me hours to do that, to interpret the structure
30 of reasoning. I have seen it happen and I will not

1 bore you with that long story. I am simply, as I
2 said, here from a point of reality and from hundreds
3 of hours in your casualty wards and caring for your
4 children. At the future, stating very simply and
5 I think, if it's so wished, I could get doctors,
6 many of them, to verify my opinion that there is
7 taking place now a situation that is a very deadly
8 one and an emergency situation at the moment, because
9 there is nothing more insidious or more able to
10 actually go through a community, very simply and
11 very chronically than drugs.

12 Many of these people, in their pocket,
13 the size of the head of a match, unlike the alcoholic
14 and the other's whose is identifiable, in the case
15 of drugs, a very, very simple sized object can
16 create havoc in a period of time that is very short.

17 I watched one the other night, walk
18 in very stable and very secure, and within a period
19 of three hours, out of a short one, out of his
20 pocket, produce a euphoria for fifteen people.
21 Inside of four hours the situation was one of/chaos.^{utter}

22 Now, certainly, I don't think this
23 fits in any way the communication lines to normal
24 living. This can be structured to reason, but, as
25 I said earlier, it would take me a great deal of
26 time to go back over my experiences to do it for you.
27 But this situation does exist. I have men right now
28 that I could take you to, who are dying on their
29 feet from the effects of drugs. And it may to the
30 younger ones here, I realize, certainly be implication,

1 but I will tell you from experience. Don't forget
2 that you are not different, and listen to experience,
3 because some of the later experiences that you are
4 going to have will happen. Certainly, at your point,
5 you are still lacking the emotional maturity which
6 will culminate the experience of living at a later
7 time. You will fully appreciate this drug lesson.
8 There are wonderful people in this country. My concern
9 is, at the moment, that we don't open those people
10 to the ones that are already paying the price.

11 I only hope that the Commission will,
12 if it already hasn't done so, avail yourselves of the
13 figures which must be available from the casualty
14 wards and from the police station, which will dis-
15 tinctly outline the situation that is taking place.
16 Certainly the hospitals should be able to provide
17 the daily basis that they are getting in their
18 casualty wards of the O.D. rates of the different
19 situations to particular drug areas, and this includes
20 LSD. The hospitals, I am quite sure, can make a
21 distinct figure available as to what is taking place,
22 and what the actual increase has been over the last
23 period of time, and the necessity to take a very
24 serious and a very deep view of the situation. It
25 can be very tragic.

26 Thanks.

27 THE CHAIRMAN: Thank you.

28 I would just like to thank you,
29 Mr. Lyon, and Mr. Kositsky, and I call Mr. Arenson,
30 Attorney Co-ordinator of the Legal Aid Clinic.

1 Mr. Arenson?

2 MR. KOSITSKY: Is it possible to give
3 further information -- not at this time -- further
4 information to the Commission?

5 THE CHAIRMAN: Very definitely. And if
6 you could send us any further statements, information
7 you can send to our office in Ottawa; it's 100 Metcalfe
8 Street in Ottawa.

9 MR. KOSITSKY: I will send you more
10 of

11 THE CHAIRMAN: Well, would you like to
12 communicate with us? We don't know what the further --
13 you can speak to Mr. Moore later about that, all right?
14 Mr. Moore is here.

15 MR. LYON: A last comment. As far as
16 I'm concerned, institutionalized schooling has done
17 more harm, to my mind, than anything I have taken
18 through my mouth.

19 THE CHAIRMAN: Mr. Arenson?

20 The gentleman at the microphone over
21 there?

22 THE PUBLIC: I would just like to
23 comment on the need for laws prohibiting the use of
24 -- rather, the non-medical use of drugs. I would
25 like to make a comparison between the prohibition
26 now and prohibition during the twenties with alcohol.
27 It didn't work. People were taking alcohol just like
28 people are taking acid right now, and pushing mari-
29 juana, and I just don't think that kind of -- it just
30 doesn't work. People search for what they want and

1 they find it. And all it does is, instead of having
2 good, clean, pure acid, or heroin, or any kind of
3 drug, you have bootleg drugs, made in a basement
4 somewhere, you know, somewhere in somebody's house.
5 There is no good acid, there is no good mescaline,
6 or anything. It's all dirty. And that's where our
7 O.D.'s come in. If you take too much dirty acid,
8 what is not acid in the pill is going to kill you.
9 It's not the acid that kills you.

10 And, it's just prohibition -- there
11 should be government controls, government produced
12 chemicals, instead of bootlegs that can kill you.

13 THE CHAIRMAN: Thank you.

14 Mr. Arenson?

15 MR. ARENSEN: Thank you, Mr. Chairman.

16 I am a barrister. During the past two
17 years I have had almost daily contact with young
18 people, primarily through involvement in the Legal
19 Aid program, and latterly as the Co-ordinator of that
20 program. And during the past year and a half I have
21 defended, or participated in the defence of many
22 accused drug possessors and traffickers, and my
23 comments are based on my observations made during
24 that period of time.

25 Some of my comments will be reflected
26 by colleagues who act also for accused people in drug
27 cases, and some of them won't.

28 The feeling of many young people that
29 much of society's public values are irrelevant to
30 a good life was not caused by marijuana or LSD, but

1 merely coincidental to their widespread use by
2 these same young people. Advocates of society's
3 present values have seized on the idea that if only
4 the psychotropic drugs that young people use were
5 banned, then dissatisfaction with present values
6 would disappear.

7 For their part, the young people who
8 use these now illegal substances, have come to regard
9 them in a corresponding light, that is, they are no
10 longer merely peculiar forms of oblivion agents, and
11 oblivion agents have been used by all men since
12 time immemorial, but they are now regarded as a
13 symbol of the rejection of all that is wrong in
14 present societal values. What's more, many other
15 fads, which originate with young people, older people
16 are now involved in. But these older people
17 happily use drugs like cannabis for the same reason,
18 instead of the more traditional agent, alcohol.

19 On the basis of personal observation
20 only, these older cannabis users, who were drawn
21 from the ranks of truck drivers, lawyers, waiters,
22 doctors, shipping clerks, architects, the whole
23 gamut and from every kind of productive job in
24 society; these people appear to function as/they^{efficiently}
25 ever did. In fact, because cannabis spares the user
26 the hangover syndrome of alcohol, and because the
27 middle class users tend to substitute these two
28 oblivion agents for each other, depending on their
29 availability, there is probably less production time
30 lost from the use of cannabis than from the use of

1 alcohol.

2 My prime purpose, however, in address-
3 sing you today, was to speak of the dangerous
4 developments which have recently occurred on a large
5 scale in drug law enforcement, namely, undercover
6 agents. Mr. Lyon referred, in his address to you,
7 to an R.C.M.P. constable who was acting undercover.
8 His information was in error as to the circumstances.
9 About fifty-five people were arrested in Winnipeg
10 by this undercover singing Mountie. They are facing
11 approximately eighty charges of trafficking in various
12 narcotics. And at the same time there was an under-
13 cover agent in Brandon whose activity resulted in
14 the arrest of approximately five people. If you
15 check the populations of the two centres, you will
16 find that that is approximately correct, ten to one.

17 The procedure used by the undercover
18 agent was simple. I will detail it by quoting
19 extracts from the cross-examination of an R.C.M.P.
20 constable who was the Superior Officer of this
21 undercover agent who posed as the lead singer of a
22 local rock group. It involved 1969 to August, 1970.

23 "Question: Did you have any control
24 over the way he, the undercover agent, conducted
25 himself under cover? Answer: Yes.

26 Question: Were you the officer in
27 charge of him in the line of authority? Answer:
28 Yes, I was.

29 Question: Did you give him instructions
30 to befriend people in order to gain their confidence?

1 Answer, Yes.

2 Question: Did you instruct him to
3 befriend women as well as men? Answer: Yes.

4 Question: Did you instruct him to try
5 to arrange romantic relationships with women in order
6 to get their confidence? Answer: He was instructed
7 to flirt with women, yes."

8 A little later, these questions and
9 answers occurred:

10 "Question: Particularly he was in-
11 terested in people who used drugs? Answer: Yes,
12 that is why he was placed under cover.

13 Question: So he was instructed to
14 become friends with as many drug users as he was
15 able to? Answer: That's right.

16 Question: Could use whatever tactics
17 seemed advisable to him in order to get close to
18 suspected drug users and drug sellers? Answer: Yes.
19 He was expected to get close to them, but there are
20 different means for every occasion."

21 Later on, while trying to determine if
22 the undercover agent was supposed to encourage the
23 users he had befriended to sell him drugs, and thereby
24 commit the offence of trafficking, the following
25 exchange occurred:

26 "Question: So he was not expected to
27 go to a drug user who had never sold drugs and
28 encourage that drug user to sell him drugs? Answer:
29 Well, if he was establishing that he was just a
30 user, or was in trafficking or not. That is why he

1 would establish it when he was talking with a person.

2 Question: The only way he could
3 establish that was by asking him to see if he was
4 selling drugs? Answer: Yes."

5 From the viewpoint of any one of the
6 various accused traffickers, here was a man with a
7 great deal of status among the young people; a success-
8 ful rock singer. He went out of his way to befriend
9 them and ingratiated himself with them. He went to
10 their parties, dated the girls. One day he asks one
11 of his new friends, who is a drug user, to sell him
12 some drugs. That person has virtually no choice,
13 considering the cultural norms offered within the
14 said drug culture, but to share his own supply with
15 his status laden new friend.

16 First offence drug traffickers, with no
17 previous record of contact with the police, by and
18 large, receive a minimum sentence of eighteen months
19 in jail. This is Manitoba I am talking about, on
20 the basis of my experience and observation of these
21 reports. He is not sentenced out of any expectation
22 that he will be rehabilitated, or even that he needs
23 rehabilitation, but out of a hope that such a
24 sentence will deter other people from engaging in
25 trafficking.

26 When viewed in the context of under-
27 cover operations, this is an attempt to change by
28 terror, one of the more enlightened cultural
29 norms established among young people today, namely,
30 if you have some, be it food, cigarettes, money or

1 drugs, you share with those who don't.

2 Can you begin to imagine the sense of
3 contempt, anger, frustration, bitterness and violence
4 that these young people and their families bear for
5 the R.C.M. Police? This outrageous trick, this
6 synical betrayal of love and friendship, seemingly
7 sanctioned by the courts and the government, is
8 creating a distrust of society's institutions in
9 the minds of many thoughtful people; which is truly
10 frightening.

11 I lay no blame on the R.C.M.P. They
12 are mere technicians who are expected to detect as
13 many drug law violators as possible, and they succeed
14 admirably in satisfying those expectations. It is not
15 for them to consider the ultimate social result of
16 the techniques that they use. It is for society at
17 large, and particularly the government, to say that
18 those means create more havoc than if the worst
19 suspicions about drug use were true.

20 In response to your interim report,
21 considering the abuse to which you have been sub-
22 jected, perhaps you might take some comfort in the
23 words of Samuel (Romeley), a great English historian
24 and parliamentarian. I intend to quote a speech
25 that Samuel Romley made on a bill providing that the
26 punishment for high treason should be either hanging
27 or beheading, instead of the then punishment which
28 was that the offender be dragged to the gallows,
29 that he be hanged by the neck and then cut down alive
30 and his entrails be taken out and burned while he was

1 yet alive, that his head be cut off but his body
2 be divided in five parts and that his head and
3 quarters be at the king's disposal.

4 In his words: "I call upon you to
5 remember that cruel punishments have an inevitable
6 tendency to produce cruelty in the people. It is not
7 by the destruction of tenderness, it is not by the
8 exciting of revenge that we can hope to generate
9 virtuous conduct in those who are confined to our
10 care. You may cut out the heart of the sufferer and
11 hold it out to the view of the populace and you may
12 imagine that you serve the community, but the real
13 effect of such scenes is to torture the compassionate
14 and to harden the obdurate.

15 In times of tranquility you will not
16 diminish offences by rendering the guilt callous
17 by teaching the subject to look with indifference
18 upon human suffering, and in times of turbulence
19 fury will retaliate the cruelties^{to} which it has
20 accustomed people.

21 From the spirit which I have seen, I
22 shall not be surprised and I certainly will not be
23 deterred by any vote of this night. I'm not so
24 unacquainted with the nature of prejudice as not to
25 have observed that it strikes a deep root, that it
26 flourishes in all cells and spreads its branch in
27 every direction. I have observed also, that flourish
28 as it may, it must by law, sacred and immutable,
29 wither and decay after the powerful and repeated
30 touch of truth.

1 It was my lot to hear in parliament
2 a negative upon that bill which was intended to deliver
3 this enlightened nation from the reproach of the cruel
4 and disgusting punishment of burning women alive. It
5 was my lot, again and again, to witness in this House
6 the defeat of those wise and humane exertions which
7 were intended to rescue Englishmen from the disgrace
8 of the veterans' labour. But the punishment of
9 burning is no more and Africa is free. No resistance,
10 no vote on this life, shall prevent my again appealing
11 to the good sense and the good feeling of the Legis-
12 lature and the country. If I live another year, I will
13 renew this bill with the bill for repealing the
14 punishment of death for stealing a few shillings.
15 Whatever may be my fate, this seed which is scattered
16 has not fallen upon stony ground."

17 You might be interested to know that the
18 bill was lost by twelve votes.

19 Those are my comments.

20 THE CHAIRMAN: Thank you very much.

21 --- (Applause)

22 MR. STEIN: Could you tell us -- if I
23 could interpret one thing you said, is it correct to
24 assume that none of those particular cases have yet
25 come through and been processed, the ones that you
26 referred to as having been a result of the undercover
27 work this summer, or have they been?

28 MR. ARENSON: All of my cases, to my
29 knowledge, presently, are before the court now.
30 Certainly, all of the cases were not guilty pleadings

1 entered on behalf of the accused. I believe there
2 may have been one or two cases where the accused, as
3 a result of the singing Mountie's operation, has
4 pleaded guilty and been sentenced by the court, and
5 the sentences were in the line of that which I
6 mentioned earlier.

7 MR. STEIN: Eighteen months?

8 MR. ARENSEN: For a first offence.

9 MR. STEIN: For possession?

10 MR. ARENSEN: These were all trafficking
11 charges.

12 MR. STEIN: Trafficking or possession
13 with intention to traffic?

14 MR. ARENSEN: Trafficking. That, of
15 course, follows from the nature of the operation that
16 the Mountie was involved in; a very effective operation.

17 MR. CAMPBELL: Is your objection to the
18 use of this procedure, this type of procedure in
19 general, ^{or} an objection to this type of procedure
20 specifically in drug cases?

21 MR. ARENSEN: Dean Campbell, one role
22 that the state surely plays, is the role of teacher,
23 and if the state teaches that sneaky, contemptuous
24 conduct pays off, then that is the lesson that members
25 of the state learn, regardless of whether you are
26 dealing with enforcement of drugs laws or enforcement
27 of any other laws; means are important from the
28 state's point of view, fundamentally.

29 THE CHAIRMAN: Gentleman at the micro-
30 phone?

1 THE PUBLIC: Yes. I will approach, this
2 afternoon as a convicted and rehabilitated member of
3 the drug culture. I was convicted and sentenced to
4 one year last May. I was arrested by an undercover
5 agent who was under the garb of a motorcycle gang
6 president. I was doing a sociological study on
7 motorcycle gangs at the University of Winnipeg, and
8 this was my research. I met the leader of this gang
9 and went out with him many times. He asked me one
10 day if I could obtain drugs for him. I did so. I
11 did not receive any money. I was convicted. I did
12 plead guilty because I had no choice. After reading
13 his testimony under oath, I had no choice. It was his
14 word against mine, and mine did not hold water in
15 that courtroom.

16 I was convicted with the idea that I
17 would not be rehabilitated and put into the correctional
18 institute for my crime. I was rehabilitated all
19 right.

20 I'm not speaking to be facetious, I spent
21 months in the institution and I have been rehabilitated
22 all right. Right now, I do not like policeman, I do
23 not like the way my society around me lives. I learned
24 a lot of things about how to do this and this illegally.
25 Mind you, I have never had any previous record before
26 me, except trafficking, and now I have this little
27 cross to bear. I have to go out there and try to get
28 a job and face the people around me with this con-
29 viction of trafficking where I harmed no one. I was
30 asked as if you asked me now for a cigarette and I'd

1 give you a cigarette.

2 You people realize this. I do have a
3 little grudge against police, because he did approach
4 me in this way. If you could only understand this.
5 I have no other crime. This is not to get sympathy
6 from you, but empathy for all those people who are in
7 our jails, rotting away and being rehabilitated to
8 make shoes and sew and things like this. If you could
9 rehabilitate me, and I am a drug offender, rehabilitate
10 me and teach me something and maybe I will go with you;
11 but not this way.

12 THE CHAIRMAN: Thank you.

13 --- (Applause)

14 THE CHAIRMAN: Thank you, Mr. Arenson.
15 Gentleman at the microphone?

16 THE PUBLIC: Yes, I was wondering if I
17 could speak about the moral issue of that undercover
18 agent, and I would like to know if not one of the
19 foundations of our morality is one of truth. And
20 when this undercover agent can come in amongst people
21 and lie to them and use their friendship to get
22 evidence against them, and then they ask you in court
23 if you will tell the truth. And it just seems that
24 what society can condone for an R.C.M.P. officer,
25 they seem to think that we have no morals, and it
26 is just a double standard. One for the R.C.M.P.
27 officer, he can come in a lie to us and smoke grass
28 amongst us, but when we are taken to court for an
29 offence like getting him grass, we are told to swear
30 to tell the whole truth and nothing but the truth.

1 Acts like this, I think, can only create
2 contempt for the society that condones such a thing
3 as an R.C.M.P. officer doing this.

4 So, when truth is asked, all that is
5 going to do is get contempt from the people that it
6 is trying to help by busting them and putting them in
7 jail.

8 THE CHAIRMAN: Thank you.

9 We will call on the representatives of
10 CRYPT, Mr. Mike Wilson, Mr. Tom Wilson, and Mr. Bob
11 Parker.

12 Gentleman at the microphone?

13 THE PUBLIC: I realize the fact that
14 what I am going to say is certainly not going to get
15 me any friendship in here, because I don't think that
16 I agree with many of you people. When a police officer
17 is under cover in order to break up drug rings, or
18 even to get people who are willing, if asked, to get
19 a person grass or whatever it is, I don't think that
20 that police officer is there in order to harm that
21 person, but rather to get that person to understand
22 that he is doing something which is against the law
23 and which can harm him and which can harm other people.

24 I think that if this was realized, then
25 people would much faster have much more respect for
26 police officers and for other people in that way.
27 I was just wondering, back on what Mr. Lyon said,
28 from the University of Manitoba, I think it was; he
29 was saying that the use of drugs should be legalized --
30 if I get him right -- he was saying that the use of

1 drugs should be legalized and that the amount of abuse
2 should be completely dependent on how the person uses
3 it, and that you would have to trust the individual.

4 Throughout the years in Canada, we can
5 see in many, many cases that people have not been able
6 to be trusted. We found this with liquor. How many
7 people have used liquor and have abused liquor at the
8 same time. I am not saying that I am against liquor,
9 but what I am saying is that with the legalization of
10 marijuana or any other kind of drug, the government is
11 actually saying, "Well, it is up to you guys, whatever
12 you want to do. If you want to harm yourself, or if
13 you want to harm other people, go ahead."

14 Another thing which I just wanted to
15 bring up; something that I have often questioned
16 myself on. This morning there was a young woman here,
17 she was standing here and made mention of the fact
18 that maybe drug education should be taught at the
19 schools in a similar fashion as sex education. And
20 also, there are many things which are being done in
21 the way of drugs in Canada this way, such as this
22 Commission here, and other people looking into drugs.
23 Sometimes I wonder if all this attention given to drugs
24 might not expose people to drugs so much that people
25 start to wonder -- that people being here start to
26 wonder what drugs really do to a person, so, instead
27 of staying away from it, he might try it.

28 Thank you.

29 THE CHAIRMAN: Thank you.

30 THE PUBLIC: I wanted to discuss a couple

1 of things, one which relates to what the speaker in
2 front of me said. I think he is ignoring the funda-
3 mental problem, and that is not whether drugs are
4 illegal or not but whether they ought to be illegal
5 or not. All kinds of things are, perhaps, legal or
6 illegal, but ought to be the other way around. I don't
7 want the government or anybody else telling me what
8 I can do with my life. There is too much of that
9 going on already.

10 If the gentleman can demonstrate to me --
11 well, the point is this: there are all sorts of
12 substances that we use all the time that have
13 potential for harmfulness. Electricity that we use
14 in our homes is potential to fires. Do we ban
15 electricity because people die in fires; do we ban
16 flame because people die in fires? The question
17 becomes: do things have a good value which outweighs
18 the things that do harm, and if they do, they ought
19 to be legal, and even if they don't, given a proper
20 program of education, they also ought to be legal.
21 Saying that exposure to drugs promises that people
22 will use them and therefore will harm themselves,
23 and others, seems to me that they ought to be saying
24 that you should prevent car advertising because
25 people can drive cars with which they go around
26 killing approximately fifteen thousand others every
27 year in North America.

28 One other point. Professor Le Dain
29 spoke earlier about full knowledge and maturity in
30 making decisions, and we allow people to make decisions

1 for themselves when they have full knowledge and
2 maturity. Well, that is very nice; there are two
3 problems on that. One is, what is full knowledge and
4 does anyone ever have full knowledge about anything,
5 the consequences of any action, and we can't prevent
6 them on the grounds that they do not have full
7 knowledge. All we can say is, we can try to provide
8 knowledge as much as we have and say, "You can use
9 it if you want, don't use it if you don't want to."

10
11 The second problem is that of maturity.
12 It seems to me that if I was younger than I am,
13 because I am now legally an adult, but if I were
14 ten or twelve, I don't think that I would want people
15 thirty years older than me deciding whether I was
16 mature. I think that people are old enough to do
17 things when they want to.

18 THE CHAIRMAN: Thank you.

19 The gentleman from CRYPT? Mr. Wilson?

20 MR. TOM WILSON: Thank you, Mr. Chairman.

21 I would really like to start off by
22 explaining a little bit about CRYPT and CRYPT's
23 role with the drug scene in Winnipeg, just what we
24 have to do with it. And we would explain that CRYPT
25 represents the Committee Representing Youth Problems
26 Today -- it's a good place to start.

27 THE CHAIRMAN: Could you speak a little
28 closer to the microphone, please?

29 MR. TOM WILSON: I would like to start
30 off by inviting questions and inviting comments

1 throughout this whole thing from the floor and from
2 the Commission. We find it a little bit easier to
3 talk in a discussion type thing instead of a fixed
4 report. I think if we -- if I could explain that
5 since June, CRYPT has seen approximately twenty-five
6 thousand kids, primarily transient youth, travelling
7 from God knows where through Winnipeg to God knows
8 where. That will help to clarify our position on
9 this report.

10 I think I will turn it over to Mike
11 in explaining our role with the medical centre and
12 its role with some of the rock festivals that were
13 happening over the summer.

14 MR. MIKE WILSON: A bunch of the medical
15 students from the Winnipeg General sort of got turned
16 on to the idea that there are a number of people in
17 this city and other cities who don't go to hospitals,
18 but need medical care. And they don't go for various
19 personal reasons, but they still don't go. But they
20 need medical services. So, they set up a free clinic
21 in our building. It makes it a little bit easier for
22 some people to get medical care. They can walk in
23 and very informally get what they are after without
24 having to go through the barrier of the lady at the
25 desk who asks them a number of questions.

26 This service doesn't just handle drug
27 cases, it handles a whole scope of medical services.
28 We have got an obstetrician and gynecologist--Gosh,
29 I wish I could say that word -- we have got a
30 psychiatric clinic, and regular medical clinics.

1 During the summer at all the rock
2 festivals, it seemed that the promoters weren't
3 particularly concerned, one way or the other, what
4 happened to the kids when they got out there, especially
5 when they got to -- what they were mostly concerned
6 with was how much money the kids were going to pay
7 them in advance.

8 In case you are not aware of it, and
9 I'm sure you probably are, kids go to rock festivals
10 and the majority of them are so stoned they can
11 barely walk. It really -- some of them have problems,
12 I guess. In large crowds of people, lot of things --
13 in large crowds people freak out.

14 We provided the services, these
15 emergency care services, back and forth to hospital,
16 just providing somebody to talk to these people if
17 that's what they needed. That's very, very briefly
18 what we do.

19 MR. TOM WILSON: The subject of drugs
20 and bad drug experiences obviously ties in to this
21 pretty closely, and the medical students and doctors
22 who work with us at CRYPT in this medical clinic
23 see quite a few kids every evening, and quite a few
24 every week, who have -- crying their brains out on
25 bad dope. And it seems to be a pretty bad problem.

26 MR. MIKE WILSON: I forgot something
27 that ties in with that. We also have a drug analysis
28 service -- it's an illegal drug analysis thing.
29 When somebody's bringing some dope into the city
30 that they're going to be selling, we either buy, or

1 they give us a sample of this, that we get analyzed.
2 This can, sort of, cut off a number of problems. In
3 other words, if somebody gets some LSD and says,
4 "This is LSD", and it's analyzed to be strychnine,
5 we can tell him that he won't get stoned. And it
6 cuts down on the strychnine cases and stuff. It has
7 been used quite a bit and it's really quite effective
8 in stopping a number of problems that we have had.

9 MR. TOM WILSON: I think we all would
10 like to see a better drug analysis centre set up in
11 Winnipeg so that -- primarily so we don't get busted
12 when we're taking the dope to the analysis centre;
13 that leaves it pretty open. I don't think much has
14 been done in the way of this as yet.

15 Another area that we would like to
16 talk about, with CRYPT's role, is in the process of
17 education. There was quite a bit of controversy on
18 the subject of education earlier this morning. Quite
19 a few individuals. Our role in the drug education
20 scene has been really effective in junior high
21 schools, high schools, teachers' groups, whatever;
22 anybody who asks us to come and talk about dope.

23 Our approach to how to handle drug
24 education programs in the school has been very
25 effective so far. We have used a very honest, open
26 approach to drugs, and try to be as objective as
27 possible in the -- in factual information that we
28 give about drugs and their effects and the impli-
29 cations involved with them.

30 The high school students seem to get

1 a lot more out of this, out of a "freak" coming in
2 and talking to them about dope, than ^{they} do out of a
3 policeman or a doctor or somebody of the next genera-
4 tion. It seems a little more credible for us to
5 talk about it, and so it has worked.

6 The only problem with this, so far,
7 has been that we are limited to sort of pilot
8 programs, crash courses in drugs where we might go
9 in and talk about dope for three hours one day in a
10 school. You can't expect the kids to get a whole lot
11 of knowledge and information and base any opinions
12 from that.

13 DR. LEHMANN: Would you just say what
14 you mean by, "It has worked"?

15 MR. TOM WILSON: We find that the kids
16 have been more open to this kind of presentation about
17 drugs than they have before. With the previous
18 methods of drug education in their schools where a
19 doctor has come in and rapped about dope for a couple
20 of hours and told them a lot of things that might
21 have been quite true, everything that he said, but
22 they didn't quite -- the credibility gap there played
23 a big part in it. And I don't think they got as much
24 out of it as they did when we were talking to them.

25 THE CHAIRMAN: How do you know what they
26 got out of it?

27 MR. TOM WILSON: We were just going by
28 what they told us when we came to talk.

29 THE CHAIRMAN: Their reactions, their
30 immediate reactions. But what effect do you think

1 your drug education sessions might have on them
2 in terms of behaviour?

3 MR. TOM WILSON: I'm not sure. Probably
4 our most difficult project in this field was with the
5 junior high school, out on the fringes of the city.
6 We were talking with a lower age group of kids than
7 we had ever done before. This was kind of a scary
8 thing, a risky thing for us, because we were kind of
9 afraid of how impressionable these young people were.
10 When we walked into the school, you know, the atmos-
11 phere was really exciting because a couple of freaks
12 were in their school, you know. When we got into the
13 program itself, the kids were all ears. They were
14 very attentive, and they were ready to believe
15 anything that we told them just because of our
16 appearance. This was kind of scary.

17 And it is kind of hard to sway the
18 biases, you know, from one point that we might project,
19 to another point in order to meet a middle ground,
20 you know, where it would be purely objective.

21 THE CHAIRMAN: What did you tell them,
22 generally speaking?

23 MR. TOM WILSON: We gave them as much
24 factual information as we have. I admit we used a
25 little more of a scare tactic approach because we
26 weren't quite sure how to talk to kids of that age
27 group, by telling them of bad LSD experiences that
28 we had had, and known of friends of having, and
29 telling them about the dangerous effects of the
30 drugs that we talked about, and pointing out more

1 the dangerous aspects too than the good aspects. We
2 were more inclined to tell them that, "If you go out
3 and drop acid,^{or}/something" -- you know, "you are liable
4 to dangers", and in some way we put our emphasis on
5 that rather than telling them that we drop acid and
6 we think it's great, "Why don't you do it, kiddies",
7 you know, that sort of approach. And it worked. They
8 put out a -- the guidance counsellor who was in
9 charge of this program, I guess, gave them a question-
10 naire, all the kids who had taken part in this program;
11 wrote out the questionnaire with things like, "What
12 they got out of the program", "Do they think --
13 does the individual think that he would be more
14 inclined, or less inclined, to take drugs after
15 hearing us talk?", asking questions about their own
16 experiences; things like that.

17 We got the report back and it was
18 really funny. The kids had been -- a lot of them
19 had been scared away from the whole thing, they had
20 never done drugs, and the top was ready to fall off
21 on either side. They admitted that, "Well, maybe it's
22 better if we wait for a few years before we decide
23 to go into the drug scene", or that, "They would not
24 like to enter into it right now". A lot of them were
25 totally turned off by the bad accounts of LSD
26 experiences.

27 A few of them thought it was far out,
28 that, "They were freaks", and that's about all the
29 response that they gave. A lot of it was pretty
30 shallow, but it was a pretty good report, and we are

1 pretty pleased with it.

2 THE CHAIRMAN: What were the ages, again,
3 of the children?

4 MR. TOM WILSON: I would estimate the
5 ages between thirteen and sixteen.

6 But this kind of program has been
7 effective in high schools, talking to kids of another
8 age bracket. A lot of them that we had talked to
9 had known just as much or more than we did, and
10 thought it was far out that somebody was doing some-
11 thing.

12 We feel that we are doing something,
13 but we would like to do more. We have a lot of ideas
14 on what we would like to see being done, what we would
15 like to do and the kind of assistance that we would
16 like to get and kind of response that we would like
17 to get to the program that we would suggest.

18 We would like to see a complete drug
19 education program sponsored in Winnipeg -- in Canada
20 for that matter, but primarily Winnipeg right now --
21 sponsored for the whole of the Winnipeg schools,
22 high schools in particular. This sort of program
23 would be very extensive, it would use altering sources
24 that we know of, that we could pull into it, to give
25 high school students as much factual information as
26 possible, and to see as many unbiased opinions as
27 possible, where we wouldn't opinionate them, or
28 cast our biases off on them, but rather, give them
29 both sides of the fence, you know, and then let them
30 sit on top and see which side they're going to fall on.

1 THE CHAIRMAN: Gentleman at the micro-
2 phone -- excuse me, a lady at the microphone?

3 THE PUBLIC: I would agree with what
4 you have just said, but I would question your going
5 into a school such as a junior high, as you did,
6 getting results of a questionnaire, and this may be
7 a short term education because maybe they will feel
8 and you do, five years from now, that they had been
9 cheated when they were scared. I really feel that
10 education has to be knowledge that is truth. It has
11 to be based on the age of the children that are
12 receiving it. Children think differently at different
13 ages, as do adults as well. And the way you spoke
14 a few moments ago, what you would like to see, this
15 is what I would like to see also. Different opinions
16 put before children but at the level that they can
17 cope with, being able to make decisions, etc. I feel
18 very strongly that someone has to take the responsi-
19 bility, not only in educating, but maybe in going a
20 little further in helping some make decisions.

21 Some of us have spent an awful lot of
22 time reading the interim report, discussing, and
23 trying to come to some conclusion as you are trying
24 to. We cannot, so I say Good Luck to you, but of
25 our decision, we are still of the opinion that there
26 should be some type of a restriction so that -- I do
27 not think that every individual is capable of making
28 their own decision, because they do not have the
29 education necessary to do so, in terms of drug use
30 and abuse.

1 DR. LEHMANN: Are you speaking about
2 adults as well?

3 THE PUBLIC: I'm speaking of adults in
4 this last instance. There has been a group of us
5 that have read this and discussed it, and I know of
6 three of us who are of the opinion that we just
7 cannot come to a decision that this should be
8 legalized and put open to everyone to use.

9 THE CHAIRMAN: You are speaking of
10 cannabis, now, are you?

11 THE PUBLIC: Yes. Maybe it is because
12 we have young children of our own, maybe you would
13 call it a little bit of overprotectiveness, I don't
14 know, but, at any rate, this is the way we still
15 feel, that there is not sufficient education for
16 people to make up their minds; not that they are not
17 capable of doing it if there was. But, how are you
18 going to disseminate all of this information.-- even
19 attitudes; from reading your report, I have a whole
20 new outlook as to the chemical approach to living,
21 shall we say, taking alcohol, drugs, nicotine, all
22 into the same sort of discussion. So from that
23 this is what we have come to.

24 Maybe when your Commission is over
25 we will have enough information and maybe there will
26 be something come of it as far as education is
27 concerned that we can change our minds.

28 THE CHAIRMAN: Thank you.

29 THE PUBLIC: Tom, I would like to
30 ask you a few questions about the drug education

1 program that you and Mike and Bob carried on in the
2 high schools, because I do not think you commented
3 on everything. One of the things that I would like
4 you to react to is the scare tactics approach.

5 MR. TOM WILSON: I would like to clarify
6 that.

7 THE PUBLIC: That is a good idea.

8 MR. TOM WILSON: The scare tactics that
9 I am talking of -- I chose that way to say it. They
10 were not scare tactics as such, the way that I have
11 seen scare tactics done in bad films and bad litera-
12 ture, and things like this, passed on about drugs.
13 If we used any scare tactics at all, it was still an
14 honest approach. We told the kids, particularly, in
15 this case, about LSD; told them some of the good
16 points that seemed to be derived from taking LSD,
17 what a lot of people get out of taking LSD in a good
18 manner for them. Okay? But, we also pointed out a
19 lot of bad things that happened to people who took
20 LSD. We were faced with a lot of kids who did not
21 even know what the meaning of "stoned" is, so it was
22 sort of a difficult thing to work with.

23 But if we used any scare tactics, or
24 if any scare tactics were brought about, I think it
25 was because this is what the kids got out of it,
26 the honest approach to it maybe scared them a little
27 bit, it scared them away from it.

28 THE PUBLIC: There is another question
29 that I would like to ask you, Bob. Is the kind of
30 reaction -- when you originally started this program,

1 supposedly an anti-speed program you were initiating;
2 you were telling me that when you got into the schools
3 they wanted to talk about dope in general but the
4 teachers in the schools wanted you to use a certain
5 kind of procedure in putting across information to
6 the class, particularly about "weed". Could you
7 elucidate on that a little bit.

8 MR. PARKER: You mean what the teachers
9 wanted us to say?

10 THE PUBLIC: Yes.

11 MR. PARKER: Well, if you wanted an
12 unbiased opinion, it would have been anything in
13 general like saying that marijuana is bad, and why
14 it was bad. Is that what you mean?

15 THE PUBLIC: But you seem to have had
16 some trouble getting into some of the schools because
17 you yourself did not feel that marijuana was parti-
18 cularly bad, and there was no way that you would
19 have wanted to go in front of a classroom and say,
20 you know, "Weed is bad, kiddies".

21 MR. PARKER: Right. When that situation
22 arose, I just did not comment on anything other than
23 speed, because that is what we were there to talk
24 about, so we made no comment on any of the other
25 drugs. We were just inclined to answer any questions,
26 and that is something we had to agree on between
27 ourselves and the teachers.

28 MR. TOM WILSON: This was something
29 that we were asked quite a few times during this
30 anti-speed program that we were doing. We were

1 frightened of the possibility, with the increased
2 number of tragedies in the summer -- this took place
3 before the summer started -- we were afraid of all
4 this speed that would be transferred from the large
5 amphetamine centres all over Canada, and particularly
6 Toronto and Vancouver. We were frightened of all of
7 this coming through Winnipeg, and a market or something
8 like a speed centre being set up in Winnipeg. We were
9 frightened of this, and we wanted to educate the high
10 school students a little bit on amphetamines because
11 it seemed to be one of the drugs that is least known
12 about, I think, among students, and that is probably
13 why they start into it more readily, because they don't
14 know anything about it, and a friend says "It's cool,
15 so let's do it."

16 That is why we were particularly frightened
17 with it and that is why we started on it, but when we
18 got into the schools and talked to guidance counsellors
19 and principals and whatever, about it, they wanted us
20 to use this method of approach about all dope, and
21 we declined from that and said that we would stick with
22 just amphetamines. The kids asked us about other
23 drugs, and when we were talking about speed, they would
24 ask us what we thought about marijuana, and we would
25 have to tell them that we could not talk about it and
26 would not talk about it. It sort of branched into
27 the program that we have been following through the
28 summer and up till now and continue to follow with as
29 complete a drug education, as much as we could do.

30 THE CHAIRMAN: What is your impression

1 of the extent of speed now? Is there a problem now?

2 MR. TOM WILSON: We were talking about
3 that last night.

4 THE CHAIRMAN: We would like to get
5 some impression about the extent of drug use. We have
6 not heard much about what changes have taken place in
7 Winnipeg through the last year, and we would like to
8 get some impression. You, presumably, are in contact
9 with the scene -- I did not mean personally -- through
10 CRYPT.

11 MR. PARKER: Well, as far as being able
12 to ascertain, speed, like meth, crystal, it is not
13 really used much here, and there are a lot of people
14 doing a lot of bennies and will drop speed, but as
15 far as banging it up, there are not too many kids
16 doing that. Part of the reason, it could be just this
17 city. It is not a vast city like Toronto or Montreal,
18 where you have to keep going all the time, so you
19 don't need to be a speed freak. It is in the city
20 but the use is limited.

21 THE CHAIRMAN: That is a very interesting
22 explanation. It is the first time we have heard that
23 it is related to the pace of the city.

24 MR. PARKER: Well, that is -- you know.

25 THE CHAIRMAN: That is your assumption,
26 is it? What is your basis for that? Is it just your,
27 sort of, intuition about it?

28 MR. PARKER: Well, no, but I have lived
29 in Toronto and in Vancouver and in Winnipeg, and,
30 you know -- I have also, you know, had experience with

1 speed to a certain degree, and I found out that a
2 city like Toronto is going all the time. People don't
3 really talk to you on the street. There is lots to
4 do, it is flashing lights, it is a hyper situation,
5 and a lot of kids start doing speed to cope with the
6 scene. By getting high on speed they can keep going
7 and going and face all of those flashing lights and
8 things.

9 Winnipeg is a very quiet place, per se.
10 The only restaurants open at night are Salisbury
11 Houses, and so on. There is not really a hell of a
12 lot to do, so you don't need to have the speed.

13 THE CHAIRMAN: It is interesting though
14 that we were told in Halifax, we were there a few
15 weeks ago, they thought that they had an important
16 speed problem there. I don't know how you compare
17 the two places in terms of pace.

18 MR. TOM WILSON: Well, the staff members,
19 I guess, have a diversity of opinions too. The
20 question of how you relate that to smaller cities
21 like Halifax that have a speed problem, they are not
22 a hyper city, they are relaxed, and we can't give an
23 answer on that, so I'm not quite sure where that
24 original question plays into this.

25 THE CHAIRMAN: It is a fact though,
26 although we should not extend, maybe, the patterns
27 of use, because we have not had a chance to see all
28 the research that has been done recently, but we have
29 the impression that speed is mainly an eastern
30 phenomenon and there is not much concentration out in

1 the west.

2 MR. MIKE WILSON: Well, let us just say
3 the prairies. Vancouver, the whole city vibrates all
4 the time. It is a pretty speedy place. I would think
5 that Calgary is rather similar to Winnipeg in having
6 a sort of absence of the speed problem.

7 I just wanted to bring up a point that
8 Tom brought up about us having differences of opinion.
9 Unlike the gentleman earlier today, we do not purport
10 to represent the majority of Canadians, we do not
11 even purport to represent the majority of CRYPT, just
12 us.

13 MR. CAMPBELL: Of those using amphetamines
14 early, is there anything that distinguishes them as a
15 population from others using other drugs?

16 MR. PARKER: Most of the people -- you
17 are talking bennies and stuff -- they are usually
18 younger, and it is not habitual; people using meth,
19 they might do some bennies for three -- like, on the
20 weekend, and then go to school. But kids shooting up
21 crystal are doing it all the time and it is a way of
22 life with them.

23 If I might just go back a bit, I did
24 not mean to say there was no speed in Winnipeg at all.
25 It is here, but it is no way near the epidemic
26 proportions that it is in Toronto.

27 MR. CAMPBELL: What do you think is the
28 motivation behind the oral use, dropping?

29 MR. PARKER: Just to get off, I think.

30 MR. MIKE WILSON: For one thing, you can

1 buy it in drug stores, it is really cheap, it is very
2 available. If somebody wants to get stoned and nobody
3 in the city has smoke, you just walk down to the drug-
4 store and pop some methedrine or a pair of benzedrine,
5 and if you don't have a fix you can still eat it and
6 still get off. I think that is the big part.

7 THE CHAIRMAN: Have you seen any heroin
8 use in Winnipeg?

9 MR. MIKE WILSON: Very little, but we
10 have seen it. There is heroin use here, but this is
11 not New York.

12 MR. TOM WILSON: We do not see -- we
13 have not seen much heroin use. We have not seen much
14 at all within our little realm of the city. CRYPT
15 only sees a certain element or level, or whatever,
16 of kids. In the summer it is mainly transient kids
17 who do not have the time to support the heroin habit,
18 I don't think.

19 The kind of kids that come into CRYPT
20 now, that use our drop-in centre, and who are there
21 all the time, they are not into the heroin thing.
22 I wouldn't say that there are not an awful lot of
23 people who are doing heroin, but I don't know them
24 and I have not seen them, and I don't know anybody
25 who has.

26 MR. CAMPBELL: What about other drugs,
27 the down drugs, barbiturates?

28 MR. PARKER: I think that is not really
29 a great problem, but it is becoming more so. More
30 kids are doing downers. The biggest kick we have seen

1 lately has been Valium and beer.

2 MR. CAMPBELL: That is Valium and beer?

3 MR. PARKER: Yes, mixing it together to
4 keep ripping. That gets you off. But myself, I have
5 not seen a hell of a lot. Seconals and tuonals
6 are being used but they are ---

7 MR. CAMPBELL: Any difference in the
8 patterns of use of cannabis?

9 MR. TOM WILSON: There is never much
10 weed in Winnipeg. There is never a lot of smoke.
11 That would account for a lot of that. It's -- I can't
12 say whether it has declined, I have never seen much
13 weed in Winnipeg. I have never seen much cannabis,
14 in Winnipeg. LSD was -- it seems to me like Winnipeg
15 has always been abounding in chemicals, and the
16 chemicals that have been here, particularly LSD, the
17 hallucinogens, have been pretty bad. Most of them
18 polluted. I found a lot of strychnine in the acid
19 that is bought on the street here, a lot of speed,
20 and it is very rare that you get -- that pure LSD
21 is found and sold on the streets here.

22 MR. CAMPBELL: This was on the basis of
23 your analysis?

24 MR. PARKER: On the basis of our analysis.

25 DR. LEHMANN: On the basis of your
26 analysis you found it's strychnine, or you have been
27 told it's strychnine?

28 MR. MIKE WILSON: Because I found it in
29 my body after I dropped acid.

30 DR. LEHMANN: How do you know it's in

1 | your body?

2 | MR. MIKE WILSON: I wanted to say some-
3 | thing ---

4 | THE CHAIRMAN: Excuse me, we've got to
5 | pursue this strychnine because we're getting this kind
6 | of evidence in the hearings, and in the first phase
7 | of our report we could not trace to actual analysis
8 | many instances. But we have to know the basis of
9 | these statements. And you say you found it in your
10 | body? What do you mean by that? What is the evidence
11 | for strychnine in LSD?

12 | MR. TOM WILSON: What is the evidence?

13 | THE CHAIRMAN: Yes, how do you know?
14 | What is the basis of your statement?

15 | MR. TOM WILSON: Speaking personally,
16 | if I would drop acid, and after twenty minutes or so
17 | my stomach starts hurting and I am getting close to a
18 | convulsive state, and throwing up and just feeling
19 | tight, you know, clamped inside, I pretty well figure
20 | that there has been strychnine in the acid. Maybe it's
21 | something else, but this is what -- just going on
22 | personal experience and what I know of strychnine.
23 | This is what I would judge is in the acid. The whole
24 | feeling of strychnine, constricted heart or constricted
25 | muscles is pretty evident that maybe there is strychnine
26 | in the acid.

27 | MR. CAMPBELL: There are two things
28 | which you mentioned earlier, that you did have drug
29 | analysis. Would you tell us about the results of the
30 | analysis? I thought I heard someone say that recently

1 the acid had been fairly good.

2 THE PUBLIC: I'm sorry, could I comment
3 on that? I disagree with Tom, from looking at the
4 results of these analyses. My impression being
5 personally, that overall, with regard to the acid as
6 being pretty good, and the most common thing, if it's
7 not acid, I think well over fifty percent of the
8 specimens in the solid acid, it is more usually a
9 relatively harmless clinical preparation. Maybe it's
10 something like this, it's more likely not to do anybody
11 any harm. And it's my impression that this has been
12 very much better over the last six months. We've even
13 seen a couple of specimens of mescaline.

14 MR. CAMPBELL: Would it be to the
15 sequential statement of the analysis that you got,
16 samples such and such in chronological order?

17 THE PUBLIC: Do you want to see it?

18 MR. CAMPBELL: Yes.

19 THE PUBLIC: (Inaudible).

20 MR. CAMPBELL: The specimen is without
21 additives?

22 THE PUBLIC: (Inaudible)

23 THE CHAIRMAN: Gentleman at the micro-
24 phone?

25 THE PUBLIC: Yes, I would like to talk
26 about the relationship between the kind of dope
27 people are taking and the kind of society they are
28 living in. I think probably there is a relationship.

29 I have been living in Banff for, I guess,
30 about the last year, and I have spent four winters

1 in Banff. And Banff is a funny kind of place because
2 the kind of society changes with the seasons.

3 From about mid-September on 'til the
4 spring, it is very quiet, a sedate kind of atmosphere.
5 I guess a lot of people realize that it's a very
6 beautiful atmosphere too. And everything there --
7 everything is available in Banff, and that means
8 acid, smoke, and everything. I find that most of the
9 people in Banff, during the winter, stick right to
10 smoke, and the better the smoke, well, great. But
11 nobody is really interested in chemicals.

12 And when the summer crop gets there,
13 and Banff Avenue is just like Portage and Main at
14 noon hour, and maybe worse, and you get in that kind
15 of atmosphere, you find the regulars trying to move
16 out of Banff, get out to the outskirts, out to
17 Canmore which is ten miles out, and if they achieve
18 this, they stick basically with smoke. If they don't
19 and they get involved with the great transient rush,
20 the tourist rush, and so on, I have noticed that they
21 turn a little more toward chemicals, speed and acid.

22 As I say, I don't think you can relate
23 this to the availability of these drugs, because all
24 drugs are available in Banff at any time. It is a
25 very small community of two thousand people, regular
26 residency. I don't think you can relate it to the
27 fact that the regulars in Banff are small town, hick
28 people either. Most of them are people who were
29 born and brought up in a city, like myself, and I think
30 a lot of them go there as a kind of refuge, to get away

1 from it all, because it is a really tranquil
2 atmosphere, especially in the winter.

3 But as I say, in this tranquil
4 atmosphere, and the availability of meadows, forests,
5 the mountains, the trend is towards smoke, marijuana
6 and hash. And it is much more enjoyable there, and
7 chemicals just aren't that enjoyable. Acid once in
8 a while because there's a fun type trip to taking it,
9 but mostly smoke. And I really think it does relate
10 to the size of the town, and the speed of the society
11 you are living in.

12 MR. PARKER: This is what I was just
13 sort of saying. This is the society I was relating to.

14 MR. CAMPBELL: You talk about grass
15 being solely present, or grass and hash, both,
16 subsequently.

17 MR. MIKE WILSON: Marijuana isn't too
18 terribly available here, but there is a lot of hash.
19 It comes in waves. That has an effect on the attitude
20 too. This is different from Banff. If the whole
21 city is filled with hash, not too many people are
22 doing amphetamines, not too many people are doing
23 acid. I've got some ideas, but then when the hash
24 becomes, you know, rare, people start doing chemicals.
25 We have seen a change -- I would like to say something
26 about the sort of people we see at CRYPT and the
27 sort of drug users we are called by.

28 Most of the people we come in contact
29 with are the people that have problems with drugs.
30

1 The people who take dope and, you know, just have a
2 good time and never have any problems, we don't
3 see, and we're not particularly concerned with. We're
4 there to try and help people with problems. We have
5 seen a little change in the type of people taking
6 drugs, and consequently a change in the drugs being
7 taken. We don't see too much of "Peace, Love, hippie-
8 type" people any more. I think the summer was probably
9 the last of that; transient kids from other cities.

10 We are getting a lot of the rougher,
11 you know, greasier type, motorcycle people. The bus
12 gets bombed, and things. But the drugs that these
13 people are taking are combination things, like, they
14 do amphetamines and do a bunch of downers and get
15 drunk, or go out and do acid, and then get drunk on
16 a bunch of rum and then bang up some crystal.
17 Different; there's a change.

18 THE CHAIRMAN: Professor Bertrand?

19 PROFESSOR BERTRAND: I heard this
20 gentleman say the availability factor in Banff was
21 not the important factor contributing to consumption
22 of a drug as compared to another drug. And I think
23 I heard you say some other thing about it, am I right?

24 THE PUBLIC: I'm sorry, I didn't hear
25 what you said.

26 THE PUBLIC: It's always available; that
27 is not a problem. What he is saying is that when
28 there is a shortage of one then there is a big rush
29 to the other.

30 MR. STEIN: Could I ask a question? Is

1 the statement you made about your existence, in part,
2 being to provide assistance to persons having trouble
3 with drugs, to be taken as the priority purpose of
4 your service? In other words, I am interested in
5 knowing, in other words, what else CRYPT is into in
6 the last year, besides assisting people who are
7 having difficulty with drugs.

8 MR. MIKE WILSON: Have you got a few
9 hours to sit and listen to the things we are doing?
10 The drug thing is just one small part -- well, it's
11 a major thing.

12 MR. STEIN: Is it possible to say
13 anything about it in less than two hours?

14 MR. MIKE WILSON: No. We can go in
15 relays, if you like.

16 MR. STEIN: Give it a try.

17 MR. TOM WILSON: I think, to start off
18 with, we could hit on what is happening at 250 York,
19 within the building. We have got a drop-in centre
20 here to provide a place for kids to come and get off
21 the streets so they can listen to music and drink
22 coffee and meet with other kids and sit and talk.
23 We have a medical clinic there inside the building
24 every night of the week and on Saturday afternoons.
25 A legal clinic on Tuesday nights. or

26
27 MR. STEIN: Just on that one, that is
28 not to deal exclusively with drug difficulties?

29 MR. TOM WILSON: No, it is just to deal
30 with any legal hassles that a kid might have. Outside

1 of 250 York -- I can't think of anything else. Oh yes,
2 counselling services, if needed, for runaway girls, for
3 example, runaway kids who don't know exactly what they
4 are doing. They have run away from home, and now what?
5 They need someone to talk to about this, family
6 problems, things like that.

7 I'm forgetting our biggest thing is with
8 our housing problem program or whatever it is. We
9 have been -- I guess that our most obvious and most
10 notable function is crashing kids who have ^{place to} no/stay,
11 crashing them in our crash pads or hostels that we
12 have during the summer. Over the summer we had three
13 hostels, two for guys and one for girls, and we were
14 crashing, I guess an average of about a hundred and
15 fifty or a hundred and seventy-five at night through
16 the summer. We had a peak night when we crashed
17 two hundred and seventy kids. The transient popula-
18 tion is down now and we are not crashing as many
19 people, but we are having more of a problem now
20 because we don't have adequate facilities, adequate
21 crash pads. We don't have enough places to send kids
22 who don't have a place to sleep.

23 MR. STEIN: What do you favour in the
24 way of facilities? What is it that you would like to
25 see available?

26 MR. TOM WILSON: We would like to see a
27 permanent hostel opened up.

28 MR. STEIN: How large, in this city?

29 MR. TOM WILSON: If it was just to
30 handle on a year round basis, and be comfortable on

1 that, and hope for summer projects to open up, then it
2 would probably be to facilitate, I guess, a rough guess
3 would be fifty people a night. That would be our prime
4 concern right now, for a permanent hostel, a place
5 where we could sleep fifty people a night.

6 MR. STEIN: Do you see anything else
7 operating out of a hostel, besides a place for people
8 to sleep? Is there any other kind of program, or
9 facilities that should go on, or is it just a crash pad
10 that you are looking for?

11 MR. TOM WILSON: No, it is not.

12 THE PUBLIC: This sounds like the same
13 sort of question that the Secretary of State has. I
14 would like to expand. I think originally we wanted to
15 see three kinds of hostels, one basically for transients
16 going from one place to another place, short term
17 stay, three or five days maximum stay, and the other
18 kind we envisioned was for those people who were
19 looking for a more permanent place to live or who had
20 some kind of difficulty that they might want some help
21 with and require a long period of time to stay.

22 The third kind of hostel, which really
23 is not a hostel, is a kind of half-way facility, and
24 don't take that literally, it is not quite a half-way
25 facility, but a place where young people who just do
26 not have any place to fit into in the community, could
27 have a place to stay to learn how to live with other
28 people. So that is the kind of programs that we saw
29 with regard to hostels.

30 We do have a half-way house, so to speak,

1 operating at this time. We have up to this point,
2 I guess about nine young people living in the house.
3 We operated a feed-in program throughout the summer.
4 Right now we don't have facilities, but we are still
5 providing the service, roughly about eighty or eighty-
6 five people a night.

7 Some of the young people within the
8 organization, the volunteers, are attempting to work
9 out a buyer's club in other locales.

10 MR. STEIN: You said a buyer's club?

11 THE PUBLIC: Yes, like a co-operative
12 food and maybe co-operative clothing thing. Some of
13 the other people are interested in a community news-
14 paper and are attempting to get some of the high
15 school kids and some of the university kids together
16 and maybe organize a viable community newspaper.

17 There are some other people who are
18 interested in organizing a farm project; farm,
19 economic, rehabilitative, maybe a dozen functions
20 at different localities.

21 The other thing that the kids are trying
22 to get together is a travelling counselling service,
23 or a travelling community, or something like this,
24 to help different locales, help set up drop-in centres
25 to help them in getting funding and maybe help them
26 just develop something on their own.

27 And, I guess like Tom said, there are
28 a million and two other things that we try to do and
29 have done. I think one of the most important things
30 that we have done is setting up a community out-reach

1 thing that we attempted to do. If there is anything
2 we feel we could get involved in, would be of some
3 benefit to go to ourselves personally, to kids who
4 come down to CRYPT or kids anywhere, we will try to
5 help and get involved, so it is the process of being
6 on boards, committees of all sorts, throughout the
7 whole community.

8 THE CHAIRMAN: Thank you.

9 Gentleman at the microphone?

10 THE PUBLIC: Yes, I would like to ask
11 a question about the drug analysis. Where did you get
12 the analysis last summer, tested for ergot alkaloids?

13 MR. TOM WILSON: I think the way that
14 it was handled, was that a particular sample was
15 brought in and it was tested for either strychnine
16 or speed ---

17 THE PUBLIC: Basically, it was analyzed
18 as was it was sold as, and secondly, if we thought
19 it was a probably impurity, we would suggest that it
20 be analyzed for the presence of those things we
21 suggest.

22 MR. CAMPBELL: Your analysis would not
23 show then if there was an imcomplete synthesis.

24 THE PUBLIC: Usually, it did.
25 They did look for bad acid.

26 MR. TOM WILSON: We found that a
27 complete analysis like that took a little bit too
28 much time for us. If you had a particular sample
29 and you wanted to find out as soon as possible what
30 was in it, or at least what it was purported to be

1 and if there was anything harmful in it, if we
2 suggested a couple of possibilities that might be
3 harmful and they tested for that and we got the
4 sample back and found that it was relatively harm-
5 less, then fine. But a complete analysis would take
6 two or three days, and that is a little bit too much
7 time.

8 MR. CAMPBELL: This is a qualitative
9 not quantitative analysis?

10 THE PUBLIC: It was quantitative
11 too.

12 MR. CAMPBELL: I would also be interested
13 if you could send to us the analytical technique that
14 was used in the determination of those samples of
15 mescaline.

16 DR. LEHMANN: Now, the analysis for
17 LSD was quantitative then. Was the analysis for the
18 other suggested possible adulterants also quantitative,
19 or simply the presence of them.

20 THE PUBLIC: Usually the presence.

21 THE CHAIRMAN: Well, thank you very
22 much.

23 We will call the next submission,
24 Mrs. Asta Asselstine. Is she still here?

25 THE PUBLIC: Yes, I would like to
26 speak here now, as a man who already claimed his
27 freedom. I would like to state that the only thing
28 I would ever give that freedom up to is love, and
29 whether I would be incarcerated because of freedom
30 of choice, I will still be a freer man than those

1 who put me there, and all I ask and say is I don't
2 want to step on anybody else's toes, and I don't want
3 anybody to step on mine.

4 --- (Applause)

5 MRS. ASSELSTINE: Mr. Chairman, fellow
6 citizens, friends, I'm glad you mentioned that you
7 like love. I like love too. I love love. But I don't
8 know if we are going about it the right way. I am
9 very concerned as a mother here.

10 In my right, I certainly feel that --
11 I have rights, but my right is not to demand love.
12 We have to seek love and know what love really is
13 and I don't think we know what love is.

14 Pardon me for saying it that way, but
15 I'm afraid it took me a long time to find out what
16 it was and certainly at your age I did not know what
17 love meant. This is not in my brief though. This is
18 coming to that. I'm going to reverse it backwards
19 because of the time element -- I have a long one here
20 compiled by very, very reliable people who know what
21 this situation is all about, the drug situation, and
22 I feel that I would like to go to the people who are
23 most qualified to speak about it. I don't want a
24 plumber to tell me about my drugs. He has a job to
25 do and if he does a good job, that is fine, that is
26 all I expect of anyone, to do the best that he can.
27 And the same thing with the people who compiled it, and
28 I have read widely on it and I respect opinions of
29 the doctors and the researchers who have done a lot
30 of work on this.

1 Before everybody leaves, I would like
2 to mention some other things that are really crowding
3 my mind, and that is, on what do we build our civili-
4 zation anyway? For example, there is one thing that
5 is foremost in my mind, and that is that I feel that
6 we have to build on what is good of yesterday. We
7 can't just throw it all out. There is a lot of good
8 to be retained. We can't just opt out and say goodbye
9 to everything.

10 I just wonder, the concept -- I always
11 felt, as a Christian, that we must try and preserve
12 life, and it worries me sick when I see all these
13 wonderful young people dying, dying for us, the older
14 generation, trying to make us see what is going on.
15 It makes me weep, in fact it has made me weep, to be
16 perfectly honest, to see these young people, to think
17 what they can do. They can go out on a rock festival
18 in throngs. Just think what we could do together
19 with pollution, the air, the water, we are in a mess.

20 The parents need help, and you are
21 adding to the parents' perplexities by the way that
22 you are opting out and leaving it all to Goodness
23 knows what because I don't think we can cope with it
24 alone. Either we have to work together, or we fail.
25 We will be done for.

26 So my feeling is, what causes all this?
27 For example, now, I founded my life, since I was four
28 years old, on religion. I know that I must build on
29 the hereafter. I must think in terms of hereafter.
30 Am I going to be like Marilyn Monroe and opt out and

1 forget. She is going to have the same thing in the
2 next life. She'll have to face herself and get what
3 she got in this life.

4 Since I have been a converted Christian
5 I have changed -- before, it was all a haze. It meant
6 nothing to me. And now that I know what Christ really
7 means, partially anyway, I do not think that we will
8 ever know exactly until we are in the next life, but
9 I feel that I must build my life on not only this
10 life, but the next life.

11 Now, I wonder how can we talk like we
12 were doing today, when so many think it's a black hole,
13 like I used to think when I was a child. I thought
14 death was millions of years away. It was just not for
15 me because in those days everything went so slowly
16 in the horse and buggy days, and I thought, "Oh, well,
17 I have lots of time, I don't have to think about that."
18 But today, we have to think about it right away,
19 because now you are faced with it. We have got to.
20 We have got all kinds of troubles facing us, and the
21 natural thing is to opt out.

22 I think there are really brave people
23 today. With all the knowledge you have you can do
24 wonders. And I'm just happy for the fact that some
25 of the people that I know who have recovered, it is
26 wonderful to know these people.

27 So, I feel very strongly that what
28 causes us to come to these conclusions, "What is there
29 to live for?" It came up this morning, "What is there
30 to live for?" Well, there are all kind of things to

1 live for, and that is to help our fellow man, and
2 do what God said, look after His world. Are we looking
3 after God's world? I'm afraid not. It was said before
4 1967 that we should try spend one whole week repairing
5 the damage that we have done to outer space, and the
6 damage that we are doing right here on earth. We have
7 not got our home really in order at all, and we need
8 help. So, we have to build on something solid.

9 There is an awful lot of knowledge and
10 I don't know, if I will live to be as old as Methusela
11 or older, but we will never know all the knowledge
12 there is to be in this world anyway, so why not make
13 a good job with the little we have.

14 Another thing we have to build on is
15 tradition. What traditions have we? Have you any
16 solid roots, way down deep roots, or are we just here
17 and gone tomorrow, that attitude? I do feel we need
18 roots, because we do not have them, many people have
19 not got them. I didn't have them myself for a long
20 time, I still don't have too far-reaching roots.
21 I've only been a Christian for eleven years. I called
22 myself a Christian before that, but I've only known
23 what it was all about for eleven years. And you can
24 be sure there are many people in the same situation.

25 And yet, we are faced with war,
26 aggression, pollution; greed and selfishness are the
27 worst of all, because if we only think of ourselves
28 I'm afraid we'll never get to our Lord.

29 And, as a young teenager told me the
30 other day, "Let them die." This bothers me. I really

1 need help myself in this case. "Let them die, they're
2 going to die anyway. Over in Biafra, let the starving
3 children die." I say, Good Heavens and Merciful, to
4 hear you talk about that, because after all, if it was
5 my child, I would be glad somebody gave him help.

6 It is really a great problem and we
7 need help. We need teenagers and all youth to help
8 in this situation. We haven't got time for drugs.
9 I'm a registered nurse and believe me, we lock those
10 cupboards up faithfully, and I don't want any drug
11 unless I'm absolutely forced to take it. If my doctor
12 forces me to take it, I'll take it. But, believe me,
13 I want reality. I don't want the life that God has
14 planned for us -- and we let it go by step by step.
15 And it will continue on in the next life.

16 And these are the basic things, but I
17 would like to mention something here which I think
18 is terribly important, and it will make you sit up
19 and take notice. Now, I don't suppose I have to
20 tell it to you but I will try and share it with you.
21 It is a report from a doctor in England: "Attempted
22 suicide, especially by young people in their late
23 teens" -- this is what really bothers me -- "in their
24 late teens or early twenties, are becoming increasingly
25 frequent in England. Dr. Mills, professor of medicine,
26 King's University, England, said in an interview with
27 the Medical Post, that his attention was first drawn
28 to this problem when he found that he was more and
29 more difficulty getting his
30 more having patients admitted to the hospital where
he is a consulting physician. His patients often

1 have conditions which do not make them actually ill.
2 He finally realized that the emergencies which were
3 taking up so many hospital beds were cases of
4 attempted suicide." Think of the poor devil ready
5 for his operation, and all the other appendectomies and
6 all the other problems that are arising. But here
7 they were, attempted suicides.

8 After a few years, examination of his
9 hospital records showed that, in fact, the commonest
10 cause for admission to a medical bed for persons in
11 their late teens and early twenties was attempted
12 suicide. And of all the medical admissions, eleven
13 percent were in this category.

14 And of all the medical admissions,
15 eleven percent were in this category. Not all
16 attempts succeeded, said Dr. Mills, but even so,
17 the successful suicide rates exceeded all the
18 civilized countries.

19 This is not a problem right here, it's
20 a problem all over this world. Let's hope Canada
21 will be, or at least, one amongst the first to give
22 some constructive change in our ways, or lives, or
23 ideals or attitudes, or whatever you want to call it,
24 so that we can get the world in order again.

25 There seemed to be -- oh, yes, these
26 disturbances, and this is quite important, I thought,
27 these disturbances seem to be part of the student
28 revolt; a term that Dr. Mills thinks is misleading
29 because -- now, this is important. I used to think
30 that too, and I quite agree that this is not just a

1 student revolt, because the same age group, even
2 when not students, does very similar things. "A
3 major factor causing these disturbances," suggested
4 Dr. Mills, "is the strain of civilization on younger
5 people." And that I mention too, I mention the fact
6 that we don't why it is , we
7 don't understand what life is all about. And can
8 you wonder much?

9 My feeling is, for example, we send our
10 children to Sunday Schools, for example, not in all of
11 our -- my life, anyway, have I known a child to be
12 sent to some qualified Sunday School teacher who
13 really knows theology. No wonder you get delusions
14 when you go to universities. And I hope that the first
15 thing we can do is to get some real sound, sensible,
16 common sense person who will teach Sunday School, and
17 really teach it the way it really is, as much as
18 possible. I know it isn't -- we are only human --
19 we're not a hundred percent, but closer to the real
20 truth of it all.

21 How many Sunday School teachers, for
22 example, who taught you, were qualified teachers?
23 How many people would send their children to public
24 school to a teacher who didn't know her geography or her
25 mathematics? And yet this is the kind -- and then
26 they say, "Oh, pooh, all religion", and that's all
27 wrong. There's nothing -- no greater thing in the
28 world than religion, I don't care what religion.
29 Christianity is for me, but then there are other
30 religions that are pretty valuable religions, believe

1 me. They mean a lot to a lot of people. So, there-
2 fore, to go back to the doctor -- the strain of
3 civilization on younger people. It is putting
4 pressures on them in a way which older people do
5 not understand. As an example, Dr. Mills used the
6 enormous expansion of knowledge that older people
7 have grown up with and have been able to get a little
8 bit, but the young have to consume a vast amount of
9 knowledge, particularly in science, very quickly.
10 Pressure is put on them in a variety of ways. There
11 is competition placed in universities, competition
12 for jobs, various competitions. He added that their
13 age; and this is very important, that their age is
14 probably significant too, because it is an age when
15 young people are trying to break away from their
16 parents.

17 I think we missed that out there,
18 because we don't start to think of the age group.
19 Because when I was eight years old, I certainly didn't
20 think like a ten year old, or a ten year old, a
21 twelve year old, or a twelve year old as a fourteen
22 year old, or a fourteen year old like an eighteen
23 and twenty year old. I mean, we are forever changing,
24 and we can't just adhere to a statement and apply it
25 everybody. It does not apply because we are all
26 different, and different age groups are certainly
27 different, even if they are different ages.

28 So, age is probably significant too,
29 because it is an age when young people are trying to
30 relate with their parents. They are in a state of

1 insecurity, and they have not yet found a husband
2 or a wife from whom they can get emotional support.

3 And this is so true, and Dr. Winten
4 Devin, I heard him at the College in Calgary last
5 year; he said alcohol, which is a drug, into an
6 adolescent, is the worst thing you can do, he said,
7 because they have enough problems of their own in
8 adolescence, and isn't it true? Even the pimped
9 face of a young teenage girl, you know what a problem
10 that is. It's a problem, it's the worst thing in
11 the world to have a pimple at the age of thirteen.
12 We have problems, we have many problems in adolescence.
13 Why do we want more problems? Because drugs do lead
14 to more problems.

15 Anyway, to go back to Dr. Mills, which
16 I think is wonderful insight given here. Dr. Mills
17 commented that drugs are the commonest thing
18 used for attempted suicides, barbiturates are the
19 most common, aspirin is very common and
20 other drugs such as tranquillizers and anti-depressants.
21 Some patients come in having taken some
22 every drug they can get their hands on. And they
23 asked, why they had attempted suicide, Dr. Mills
24 said, "Those patients are quite open about it,
25 although some deny having done so." The cause is
26 usual a trivial event, and only occasionally a major
27 calamity occurred. And that gives me hope, to think
28 that way.

29 It isn't serious to the youngster
30 after all, it is trivial. But this is the whole

1 thing, and this comes next, that the problem that
2 people are faced with now, because if you don't have
3 the help when it's needed, you might lose a precious
4 life. Because I still believe in the precious God
5 and that life is precious, no matter whose life it
6 is. Provided they are carefully followed up and
7 given the moral support that they need, the recurrence
8 rate is very low.

9 But pressure on the physicians' and
10 psychiatrists' services, with such huge numbers
11 coming through, means that they cannot be given the
12 follow up they should get, and for this reason, the
13 recurrence rate is in the fifteen percent. Once past
14 the age of thirty, their chances of re-attempting
15 suicide decreases.

16 He concluded, "The incidence of
17 attempted suicide in young people is one in four
18 hundred in women, and men, one in (350) each year,"
19 and the incidence has gone up dramatically in the last
20 ten years. In all the developed countries, it
21 is still rising. This is a very serious thing when
22 it does. And I believe that youth can cope with it
23 if they would join forces with the older generation,
24 and not fight over petty things,
25 and get on with the job of living, and making life
26 more wonderful, and maybe we will find God after all.

27 I have many things here, but I think
28 the time is drawing short, and I don't think you want
29 to hear any more.

30 This is just to prove what other people,

1 researchers, have found about marijuana, and how we
2 should not legalize it. And I certainly say, don't
3 legalize, for heaven's sake. Let's think about more
4 constructive things than opting out, and forgetting
5 the world we live in. We have a wonderful world, but
6 we have a lot of repair work to be done.

7 And I would like to say one more word,
8 that we can do it if we all -- because if all those
9 people who went to the rock festival, if they would
10 go like that and go after the pollution, and go after
11 the mercury in the fish and our environment, and
12 outer space. And when they went to those rock
13 festivals, boy, the sky's the limit. I know you
14 can do it if you want to.

15 Thank you.

16 THE CHAIRMAN: Thank you, Mrs. Asselstine.

17 THE PUBLIC: Ma'am?

18 THE CHAIRMAN: Mrs. Asselstine, there
19 is a gentleman at the microphone who would like to
20 speak to you.

21 THE PUBLIC: You were asking us about
22 going to rock festivals and fighting pollution. But
23 you do that, you walk out on the street, you get
24 your head clubbed, you get clobbered by -- you say
25 that festivals are a kind of way of keeping us out
26 of the mainstream of life and so are the jails, and
27 that's where we're going to end up. Our elders love
28 us so much that they're going to throw us in jails
29 because we carry flowers in our pockets. Do you
30 understand that? How can you ask us to co-operate

1 with anybody that's going to throw us in jail?

2 MRS. ASSELSTINE: Oh, they will not do
3 that. If you genuinely want to, they won't do that.
4 If they can see that you genuinely mean business,
5 believe me, they will not throw you in jail. We
6 need you.

7 THE PUBLIC: Well, come talk to us in
8 jail, then.

9 MRS. ASSELSTINE: I've been in jail
10 talking with one person, and I'm glad to talk with
11 anybody in jail or anybody anywhere else. I'm a
12 mother and I love people. And I think there are lots
13 of people like myself, only sometimes it's very
14 difficult. I just say I care, because, watching my
15 own children and my friends who come contacting me,
16 and so on. But, believe me, I think if you show
17 by your actions, and by your thoughts and by your
18 deeds, that you really mean business, you will
19 certainly convince others besides myself what you
20 can do.

21 THE PUBLIC: Well, I believe you can
22 shove us , put us in jails. Can you understand
23 that?

24 MRS. ASSELSTINE: Yes, but why were
25 you in jail? It wasn't because of pollution, it
26 wasn't because of that because you were already --
27 well, pardon me, I don't know what you were doing,
28 that's why I ask. What were you doing to get into
29 jail?

30 THE PUBLIC: I'm not doing anything, I

1 carry a flower in my pocket, and I'll be busted for
2 it.

3 MRS. ASSELSTINE: Oh, no, I carry a
4 peace rose; it's a wonder I don't have it on today,
5 I carry it everywhere.

6 THE PUBLIC: Okay, I carry a flower
7 called cannabis, and I'm locked in a jail. It's
8 as simple as that.

9 MRS. ASSELSTINE: But, yes, you just
10 carry it?

11 THE PUBLIC: And what does that flower
12 do? It just calms my nerves when I feel up tight,
13 and people are going to go out and kick their heads in.

14 MRS. ASSELSTINE: Well, listen, if you
15 feel up tight, you come and see me. Boy, I'll give
16 you something to do that's really constructive and
17 you won't have to try cannabis, believe me. I've
18 got twenty jobs waiting for me and I sat here all
19 day, but I can keep twenty people and myself busy
20 because I see such a lot to be done. I can't do it --
21 I say, "I wish somebody would offer to help me", but
22 I can't do it alone. You can't do anything alone,
23 you know, you've got to work together. People can't
24 work alone.

25 THE PUBLIC: What she said about the
26 problem ---

27 THE CHAIRMAN: Will you speak into the
28 mike, please?

29 THE PUBLIC: I think she said that the
30 problem really is the fact that she says there's

1 plenty to be done. And there are a lot of people
2 who would like to have something to do, but there is
3 no place for them to do it. Our society doesn't set
4 a place for them to do it. It puts them on educational
5 reservations, and takes up their time with this
6 educational bullshit when they could be out learning
7 how to live and learning how to get along in the
8 world, economically and socially. And the way I view
9 the situation, we, only in the last two or three
10 hundred years have come to have this period of life
11 known as adolescence anyway. This time we are just
12 supposed to just kind of skip off into the never-never
13 land, liberal education, and kind of learn to be
14 human.

15 Previous to this time, people, kids
16 down to the age of eight, or seven and eight, were
17 considered adults. They were given admission into
18 the taverns, they were around to play with the adults,
19 the adults and the kids, there was no such separate
20 category.

21 But now, the people in the ages seven
22 to twenty-six, thirty, we are unnecessary. We are
23 good as Canada Power, we are good as far as consumers,
24 we absorb all the products of our society, that is
25 very good, but otherwise, we have no use. And so
26 many people will just say, "Well, we are here to
27 consume, why don't we consume what we will, and that
28 includes drugs, and that includes everything."

29 MRS. ASSELSTINE: I think it is
30 changing now. I think that we will stop consuming so

1 many drugs, including alcohol, all sorts of drugs,
2 and also food. We are overeating ourselves into the
3 grave anyway. And when we use our senses sensibly,
4 we come to our senses more, and then maybe we can
5 really get somewhere.

6 Look at the people starving to death,
7 for example. We have far more than we really need.
8 We eat far too much. And another thing, we can't look
9 after ourselves. Whatever you do when you are seven
10 or eight years old, I would say, if we can't look
11 after ourselves, we can't look after anybody else.
12 I always brought my children up on that basis.

13 THE PUBLIC: We can't look after our-
14 selves until we have a full university education.

15 MRS. ASSELSTINE: That is nonsense.

16 THE PUBLIC: That is true. We are of
17 no economic value, we are just nothing until we have
18 that degree, that is it.

19 MRS. ASSELSTINE: That is wrong. Some-
20 body has brainwashed you. Because I appreciate my
21 garbage man as well as anybody, providing he puts
22 that lid on that garbage can. But if he bangs up
23 my garbage can and the dogs get at it, then I have
24 to go and pick it up again, but if you do a good job
25 of what you are doing, I say, God help you, you are
26 doing a job, and the Lord loves a man who is willing
27 to work and help, no matter what kind of job you have.

28 THE PUBLIC: Most of the jobs are
29 being done by machines, and the jobs that are left
30 are totally meaningless, and there's competition and

1 so you end up being worked to death. I personally
2 don't need any more garbage jobs.

3 MRS. ASSELSTINE: I do. I have garbage
4 every day, and I have to take it out yet, too. And
5 as long as we are made the way we are made, to eat
6 and have refuse the same way, as long as we are made
7 the way we are made, you can't stop the way we are
8 made, we have to face ourselves as we are and cope
9 with ourselves as we are. If we stopped eating we
10 would not have many problems, would we, but we are
11 made that way and we have to look after ourselves.

12 THE PUBLIC: ^{didn't} I mean to talk about
13 environmental pollution and garbage. What I am
14 saying is that society does not have room for people
15 that are young and because of this they take the
16 initiative -- what initiative?

17 MRS. ASSELSTINE: May I mention some-
18 thing very much to the point here. I'm right now
19 in the midst of teaching a Sunday School class and
20 I cannot get young people I need to work only
21 fifteen minutes and I was hoping to come up Saturday
22 afternoon for the worship activities that we have,
23 and do you think I could get anybody. No, I cannot
24 get one person. I have to get my shopping bag and
25 set everything up Saturday afternoon and on Sunday
26 morning, but nobody has time to help me prepare it,
27 because I always feel that if they help you prepare
28 it, they know how to do it, and they will show the
29 little children how to go about it, but they want to
30 just be there, and I have to come there Saturday

1 afternoon, prepare it all, set it all up for them,
2 and they will come for ten minutes and then breeze
3 away to their own classes and I'm left to clean up
4 and there to prepare it. But they just/don't want to be
5 there, to do it, because they are too busy doing
6 other things. So, I need some of you people out
7 where I am.

8 THE PUBLIC: Perhaps they cannot find ---

9 MRS. ASSELSTINE: It is the time that
10 they have not got, that they say. I respect them
11 for that, I believe that they are busy people. First
12 things first.

13 THE PUBLIC: Perhaps I cannot find
14 a commitment for religious courage that they find.
15 I personally can see the Christian end and even the
16 evangelical, but -- I can understand that, but most
17 people that I know would not go near the church
18 because the church has betrayed them so many times.

19 MRS. ASSELSTINE: But, you mustn't
20 forget that you must find out what is good about it
21 and then proceed from there. Look at how Israel grew.
22 They picked out what was good from all the other
23 tribes around them. They did not throw it all out.
24 They built on what was good, and then left the bad
25 out, and they accomplished great things that way.
26 We could too.

27 THE CHAIRMAN: Thank you.

28 THE PUBLIC: I would like to ask a
29 question. I hate to seem ignorant, but listening to
30 you talk for ten minutes and I got nothing out of it.

1 I did not understand two words that you said during
2 the whole thing, and I wonder if you could put in
3 one or two sentences, sum up the speech you made so
4 I can understand what you are trying to get across.

5 MRS. ASSELSTINE: You are asking me this?

6 THE PUBLIC: Yes.

7 MRS. ASSELSTINE: I'm just saying, very
8 briefly, I'm saying there is so much to be done in
9 this world. God's world was created for us and we
10 have dominion over it and look after all things in it.
11 And that is our biggest duty of all, if we believe.
12 I don't know what you say to someone who does not
13 believe. That is what I say. We need more sound
14 teaching.

15 And when I'm saying that there is so
16 much to be done in a constructive way, why opt out
17 on drugs. We do not need drugs unless we are ill
18 and the doctor will prescribe them for you if you
19 need them. I would not want a drug near me. I would
20 throw it to h-e-l-l. I don't need it, and I will
21 take it when a doctor prescribes it. That is what
22 I'm talking about.

23 THE PUBLIC: Let me ask you this.

24 People have tried to get anti-pollution bills across
25 and the government says, "Okay, we will do things
26 about it", and they never do anything about it because
27 the people who are polluting are making money by
28 polluting. They get oil out of the ground and to
29 smelt it they have to pollute the air. That is what
30 happens when you smelt the oil. To make rubber you

1 pollute the air. The anti-pollution bill should have
2 been gotten across ten years ago. It is too late now.

3 MRS. ASSELSTINE: It is never too late.

4 THE PUBLIC: The ocean is so full of
5 DDT and the fish can't eat it; it kills them to eat
6 it. What are you going to do?

7 MRS. ASSELSTINE: It is never too late.
8 If you have lots of time, then let's get on with it.
9 I'm working at it right now. I am using that low
10 phosphate in my washing, I do washing every day, and
11 I have got to choose. Every mother, every housewife
12 can do something. Everybody can do it in small ways,
13 and learn more what we should do. There are many
14 books out now, and if we could all get them and read
15 them, you just don't know where we can go. We could
16 turn this world for good.

17 A force of young people like you
18 people, and thousands of you -- it can be done.
19 Don't get that idea that it can't be done. It can
20 if you want to, but if you don't want to then nothing
21 can get done.

22 THE PUBLIC: People have been trying
23 for years and years to get things across. People
24 have got their heads bashed in trying to say, "Stop
25 pollution." Now, when you go to a demonstration, and
26 you get all these people to show the rest of the
27 world, all these people say that it is wrong, and
28 all these people can't be wrong, and they still get
29 their heads bashed in. What are you going to do?

30 MRS. ASSELSTINE: I say, never give up.

1 THE PUBLIC: I just don't bother
2 any more because I don't want to get hurt.

3 MRS. ASSELSTINE: Never give up. That
4 is my motto, never give up, because through suffering
5 we are made strong and I have had suffering too, in
6 many ways, and people don't realize that, but it
7 hasn't hurt me in the long run. It has made me
8 stronger.

9 THE PUBLIC: You suggest that we should
10 build on a solid foundation, like tradition. I am
11 really wondering, are your guns, your fuckin wars,
12 your automobiles, really solid? This economy is based
13 on the exploitation of these things. It's no wonder
14 that people are not interested in life-style. People
15 want to do, not just exist. I'll help you fight your
16 pollution but you created it, not me, and if you want
17 to ---

18 I don't want your wars, I don't want
19 your guns. We are living because there are wars,
20 that is the only reason. If you give me a gun I will
21 shoot you, not the enemy.

22 MRS. ASSELSTINE: I don't think you
23 understand.

24 THE PUBLIC: And I really hope you get
25 your lollypop upstairs, when you die.

26 MRS. ASSELSTINE: I'm sorry you feel
27 that way, because I mean it in love. It does not
28 matter what you are. We have to fight this together.
29 If somebody's down and out and crawling and suffering
30 would you go down and poke them on the head? Is that

1 what you would do to me. You are killing me now, twice.

2 THE PUBLIC: You are killing a lot of
3 people. You are saying things like, "Young people
4 have a lot of problems." And then you mentioned the
5 problem of a pimple. A pimple is a reality, it is
6 not a problem. But you make money by going on TV
7 and saying, "Oh, I'm going to the party", and then
8 you say, "Oh, no, a pimple!" You created the problem,
9 the problem is not the pimple. Things are facts,
10 you make them problems. Your interpretation of these
11 facts make them problems, and the same with dope.

12 MRS. ASSELSTINE: You have twisted my
13 whole story. I was referring to the pimple in a
14 different way. Let me give you the example of the
15 pimple again. You misunderstood me. I am saying
16 that when you are a teenager you have many problems
17 which will not give you problems. If I have a pimple
18 today, it doesn't bother me a bit. When I was fourteen
19 it bothered me.

20 THE PUBLIC: It bothered you because your
21 appearance made it a problem. It is not a problem,
22 it is a little lump on my forehead. It does not
23 hurt me.

24 MRS. ASSELSTINE: You must try to
25 realize what I am driving at. I do believe that all
26 these ads in the newspaper and all the advertisements
27 about liquor and that ---

28 THE PUBLIC: But you are supporting
29 them.

30 MRS. ASSELSTINE: No, I'm not, absolutely

1 not. Do not put words in my mouth. I will speak
2 for myself in that way. It was not until I went to
3 my school teacher and spoke to her about the pimple.
4 She said, "Don't worry about that pimple. Nobody
5 has got time to look at you anyway." And that
6 helped me more than anything else.

7 THE PUBLIC: What has that got to do
8 with dope?

9 MRS. ASSELSTINE: Everything, because
10 you can't face your pimples and your problems, and
11 you opt out on dope.

12 THE PUBLIC: Madam, I think your
13 intentions are very excellent, and you mean well,
14 but I think you are more confused than the kids
15 here are. Your basic assumption is that using drugs
16 makes you cop out. Well this is a grass generation,
17 but when you are on grass you can dig the scenery
18 and see what is happening, and when you are off grass,
19 you go to do something about it, it is a dead end.
20 Don't assume that just because you do up on grass
21 that you cop out. That is not true. Who brought
22 in all the pollution, who brought in the issue of
23 poverty, the issue of war, the issue of pollution,
24 the issue of over-population, to such publicity if
25 not this generation?

26 MRS. ASSELSTINE: That is true. We
27 are faced with that situation. I agree with you.
28 We are caught in a mess. But as I said, a creeping
29 person, all bloody and mutilated and ready to die,
30 usually you are killing that person outright. You are

1 not helping them. You should love if you say you
2 love. You must think to forgive and forget, and
3 work for the positive and not the negative. We have
4 made a mistake already, well, then, help us find the
5 right way. You will never find it by telling me that
6 "You have done wrong, you have done wrong, you have
7 done wrong." I know it is wrong. Then tell us what
8 to do to go on the right track. And you can do it.

9 You can go to pop festivals and you
10 can get there in thousands and droves and there would
11 be thousands of you people, research, the books that
12 are already out in print, thanks to all these authors;
13 the sky is the limit for what you can do for good.

14 THE PUBLIC: Ma'am, you seem to forget
15 that there is nothing we can do if we are thrown in
16 jails and that is what the laws are set up to do right
17 now, to throw us in jails, to keep us off. We are
18 not good workers, we are not efficient machines. Do
19 you understand that?

20 MRS. ASSELSTINE: Yes, but I am afraid
21 that I have learned a few things from my own child,
22 and when I was your age too, when I was young. We
23 used to have to work, work was always second nature,
24 and this is what causes this generation gap. They
25 don't want to hear about it. Believe me, there is
26 nothing wrong with honest-to-goodness work, and I
27 didn't like working any more than you do when I was
28 that age, but I had to scrub floors, and I did cleaning
29 on Saturdays and all kinds of this kind of thing, but
30 today it is a changed atmosphere. But, I still say

1 I'm glad that I had that upbringing, because now
2 when I am an adult I realize what wonderful training
3 it was to learn to work. I had to go and scrub floors
4 in a mental hospital for several years.

5 THE PUBLIC: Excuse me, ma'am, don't
6 you think that this generation you are criticizing
7 for being so hypocritical is one of the most aware
8 generations there has ever been?

9 MRS. ASSELSTINE: Yes, but I wish they
10 would do something about their awareness.

11 THE PUBLIC: Well, where does it start?
12 Doesn't it start with awareness? I can't recall any
13 other generation voicing their opinions as strongly
14 about pollution, about wars, about suffering. You
15 were talking something about work. You are right,
16 there is a lot of work for a lot of people. There
17 is a lot of work. Young people can work in hospitals,
18 care for the sick, for the wounded. I have a mother
19 who worked in a hospital. But me, as an individual,
20 I want to see why people are being put in hospitals
21 because of wars, because of pollution. That is what
22 my interest is. I don't want to see people suffering
23 in Biafra and I don't want to go out there and help
24 them any more. I don't know why they are starving,
25 and I don't want to make noise about it, and I think
26 this generation has done a lot to make people aware.

27 You are criticizing us for being
28 apathetical and taking drugs. I am saying we are
29 not apathetical and we are trying to do something
30 about it and that is why we are in jails and that

1 is why people are condemning us. Not because we
2 are apathetical, but because we are making too much
3 noise.

4 --- (Applause)

5 MRS. ASSELSTINE: I would say be
6 patient. That's the biggest thing of all. I had
7 to learn patience, patience, patience. I learned it
8 as a mother and I've been trained in patience because
9 I am a mother and a mother has to learn that. And I
10 think this is the trouble. The world is going too
11 fast, and while we are waiting and patiently waiting
12 we are learning at the same time, don't forget. So
13 keep up your goals, they're wonderful goals, I hope
14 you keep them up. They are all needed, everyone of
15 us.

16 THE PUBLIC: Ma'am, do you support
17 our cause to have dope legalized?

18 MRS. ASSELSTINE: I say a hundred
19 percent no, don't legalize it.

20 THE PUBLIC: We're not saying your
21 child is going to be on dope. We're saying we don't
22 want to go to jail for it.

23 MRS. ASSELSTINE: Well, that's the
24 law and I don't think that the law would, certainly
25 alter -- certainly, you will have a record, for
26 example, but why do you want to experiment, anyway?
27 You know very well, there's no doubt in my mind.
28 Even as a child, I wouldn't want any medication
29 unless I really needed it and it was prescribed by
30 a doctor. If a doctor wanted you to have it, ask

1 him for it and he'll tell you whether you need it
2 or not.

3 THE PUBLIC: I can grow my own in my
4 back yard, it's that simple.

5 MRS. ASSELSTINE: I would say simply
6 go and grow some poppies for something but not --
7 not the seeds, not the poppy seeds, but for love,
8 but not for using it on the brain. I say that
9 poppies grow in Flanders Fields but I know that's
10 wrong too, and I say, the honourable dead, let's
11 work for this honourable dead; they died for us.
12 Let's work for a better world, not a worse one.

13 THE PUBLIC: Don't you think that the
14 fact that people are hassled so much because dope is
15 illegal, don't you think the fact that they are
16 thrown in jail for it and their lives made miserable,
17 because they are hassled so much, because it is
18 illegal; don't you think that causes a lot more
19 problems than if it was legal and you were allowed
20 to -- people are going to use drugs whether it's
21 illegal or not illegal. And if it is legalized
22 it is just going to eliminate the paranoia of
23 getting busted and the misery of broken families
24 and lots of people being prosecuted because of it.

25 THE PUBLIC: Excuse me, I think we
26 are a little off the topic, because, like, you know,
27 I came here to rap about the drug laws. And, I mean --

28 MRS. ASSELSTINE: Well, the drug laws,
29 as far as I am concerned, I say you don't need any
30 drug laws. I say we can have a wonderful world and

The first part of the paper is devoted to a general discussion of the problem of the origin of life. It is shown that the problem is not only one of the most important but also one of the most difficult in the history of science. The author points out that the problem has been solved in a number of cases, but in the case of the origin of life it has not yet been solved. The author then proceeds to a detailed discussion of the various theories of the origin of life. He discusses the theory of spontaneous generation, the theory of biogenesis, the theory of abiogenesis, and the theory of panspermia. He also discusses the theory of the origin of life from non-living matter, the theory of the origin of life from living matter, and the theory of the origin of life from extraterrestrial matter. The author concludes that the problem of the origin of life is still unsolved and that further research is needed to solve it.



1 we can abolish all alcohol, and we can have pro-
2 hibition again.

3 THE PUBLIC: You can't.

4 MRS. ASSELSTINE: I say prohibition
5 days were far better than this. I can give you books
6 to read that show that people were far more kindly,
7 and I can quote , I haven't quoted it to you ---

8 THE PUBLIC: But we advocate this to
9 try to show that we want our freedom of choice.

10 MRS. ASSELSTINE: You want your
11 freedom of choice.

12 THE PUBLIC: There's a topic, and
13 everybody's up tight ---

14 MRS. ASSELSTINE: You want your
15 freedom of choice. Where's my freedom of choice?
16 Where's my freedom of choice? I haven't had a
17 freedom of choice yet.

18 THE PUBLIC: Your freedom of choice,
19 you came here today just like we did, and you don't
20 like alcohol and you don't like drugs. I like alcohol
21 and I like drugs, and, I mean, there's no point us
22 rapping any longer.

23 MRS. ASSELSTINE: If we just used the
24 money we use for alcohol and the money we use for a
25 smoke, what couldn't we do in this world.

26 THE PUBLIC: Yes, but what do we use
27 for wars?

28 MRS. ASSELSTINE: Right, right, right.

29 THE PUBLIC: For wars too.

30 MRS. ASSELSTINE: For wars too. And

1 take all that money and put it into a constructive
2 thing, a useful, wonderful thing to make life happier
3 for everyone. Then you've got something, and if you
4 can do that, boy, that's a big challenge for you.

5 THE PUBLIC: Gathering marijuana
6 wouldn't cost us anything.

7 MRS. ASSELSTINE: It'll cost you
8 plenty.

9 THE PUBLIC: Like?

10 MRS. ASSELSTINE: It will cost you
11 broken homes, your parents will be worried sick about
12 you and it wouldn't do you one iota of good that
13 you'd be going into a different world.

14 THE PUBLIC: I'm not worried sick.

15 MRS. ASSELSTINE: But the taxpayers
16 are. Wait until you pay for your own, and then you
17 can talk like that. If you had to be a taxpayer
18 and pay your own bills -- I was brought up with the
19 idea that if you can't pay for something don't buy it.
20 I never had a dress I could buy until I was twenty-
21 five years old because I had no money.

22 THE CHAIRMAN: Excuse me, if I may
23 interject here. We have got a submission here, I
24 should call -- we have one more submission here from
25 Mr. Howard Gurevich.

26 I want to thank Mrs. Asselstine for
27 her time today.

28 Mr. Howard Gurevich.

29 Thank you, Mrs. Asselstine.

30 MR. GUREVICH: My name is Howard Gurevich

1 and my colleague is Mr. Ian Grant, and we ask your
2 indulgence for the next few minutes.

3 Mr. Chairman, and esteemed members
4 of the Commission, fellow colleagues, ^{exteraneous} elements,
5 leave to table a report in the form of two books,
6 written by several members of the human race. The
7 first book is called "The Child's Garden of Grass",
8 otherwise known as the "Official Book of Marijuana
9 Users," and the second is a treatise named, "The
10 Western Book of the Dead."

11 We ask you to lend us an ear while
12 in our humble way we tell you a few stories.

13 MR. GRANT: I would like to read you about
14 the history of marijuana. It reads, "Chapter One,
15 History of Grass. The world is so full of a number
16 of things, I'm sure we should all be as happy as kings",
17 which is a quote from Robert Louis Stevenson. It goes
18 on to say that grass was first discovered in Twin
19 Falls, Idaho, in 1907 by a Polish immigrant by the
20 name of (Wayne Correga). The discovery occurred early
21 in May while Wayne was working late on a study
22 where he tried to find a shorter route to India.

23 MR. GUREVICH: There's another little
24 story here. This one is called, "The Three People
25 Approaching the City". This story which characterizes
26 passivity isn't very funny but it's valid. If you
27 haven't heard it before, we claim to have made it up.

28 Three men came to a walled city at
29 midnight and a sign on the bolted door of the walled
30 city read, "This door will remain locked until 9 a.m.

1 tomorrow morning." Just by coincidence, the three
2 men happened to be an alcoholic, an acid head, and
3 a user of grass. Yes, you guessed it, it's one of
4 those rotten three part jokes.

5 After reading the sign, the alcoholic
6 says, "Let's break down the door", and the acid head
7 said, "Let's float through the keyhole", and the
8 grass user said, "Let's sit down and wait until
9 tomorrow morning."

10 Another little story called, "On
11 Meditation."

12 MR. GRANT: The book goes into great
13 depth on transcendental meditation. I'm just going
14 to read you an example of it.

15 is a bastardized
16 "The following form of transcendental
17 First, get a
18 meditation which has worked for us. / magical word
19 itself.
20 which is meaningless in itself and of / Supposing
21 the word should come from a maharishi, or one of
22 his teachers, exclusively a word v.
23 very personal and used exclusively by you. Being
24 of a pragmatic nature, we fail to see why you can't
25 make up your own magical word.

26 Most masters^{that} have been heard of
27 have sought information by the usual methods
28 of kidnapping and torture. ... Have
29 four syllables with the first syllable stressed.
30 And that's sort of a brief thing on meditation.

31 It has an asterisk at the bottom of
32 the page saying, Ernie Lundquist used to meditate
33 quite a bit while stoned but has recently given up.
34 He said he finally saw God and God told him to stop

1 meditating.

2 MR. GUREVICH: There is another
3 little part here called, "Concerning the Dangers of
4 Marijuana." Chapter A, "The Dangers of Grass. A child
5 should always say what is true and speak when he is
6 spoken to, and behave mannerly at the table, at least
7 as far as he is able. The dangers of using grass
8 are, one, getting busted.

9 There's another little story here
10 called, "A Short Look at the Hell's Angels."

11 MR. GRANT: This is another thing in
12 the sub-chapter entitled, "Passivity - Inertia.
13 Everyone is more passive when stoned than when
14 straight. This does ^{not} mean that everyone is passive
15 when stoned in the purest sense of passive. Hell's
16 Angels get stoned a lot and they are not passive.
17 They are mean and nasty. Imagine just how mean and
18 nasty they would be without grass. They would
19 probably get rid of their bikes and get tanks
20 by steam rollers to run you over with.

21 MR. GUREVICH: Another little story
22 on profound revelation. A definitive story that
23 calls for profundity concerns a well known writer
24 who one evening while stoned on something other
25 than grass, but the principle is the same, was
26 struck by a revelation of a universal trip. He was
27 overwhelmed by his insignificance and managed to
28 bring himself back to reality long enough to
29 scramble to his ready desk and frantically scribble
30 down his new found wisdom on a scratch pad. The next

1 morning our hero awoke, remembered that he had had
2 some kind of vision, leaped out of bed to read what
3 he had written. He picked up the piece of paper
4 and read, "There's a funny smell in the room."

5 We give our acknowledgments and thanks
6 to the writer of "The Child's Garden of Grass" and
7 we have a little book called "The Western Book of the
8 dead."

9 MR. GRANT: We are going to read this
10 book to you in its entirety because we feel it has
11 some train of thought on what's gone on in the
12 afternoon.

13 Chapter One: In the beginning, i.e.,
14 before the beginning, there was nothing. And matter
15 came out of nothing and matter was chaos.

16 Chapter Two: Strangely and for no
17 reason whatsoever, chaos started to change. Simpli-
18 city begat complexity, randomness begat order
19 and most peculiar of all, organic matter begat organic
20 matter.

21 Chapter Three: Many, many years passed,
22 and quite by chance, organic matter developed in a
23 strange direction, became more and more complex.
24 And then for no apparent reason, became conscious
25 of itself, called consciousness a mind, and it
26 gave itself a name and that name was man.

27 Chapter Four: Man, equipped with
28 mind, found that it played peculiar tricks on him
29 and he found that instead of accepting himself as
30 part of matter, he longed for significance,
31 a desire not to live for a purpose. Instead
32 of being pushed around by blind chance, he wanted to

1 direct his own affairs. He also found that there
2 was a state of being that was entirely satisfactory,
3 and he called that "Love".

4 Chapter Five: Man kept on searching for
5 a purpose and meaning and after a while strange
6 rumors began to spread. Rumors that spoke of a
7 creative God who was Love, who created man in His
8 own image. Many men believed the rumors, ~~it~~ gave
9 their ~~lives~~ meaning. ~~It~~ told that the universe
10 was not purposeless after all. Inspired by hope,
11 ~~these~~ ^{believers} ~~started to write~~ and to chip away at blocks of
12 stone. Some of the craftsmen were extremely skillful
13 and seemed to be expressing the longings and aspira-
14 tions of all men. To these exceptional pieces of
15 craft a name was given and that name was "Art".
16 ^{wrote and} Some of the men who painted and chipped, were called
17 Artists, and all their Art said man is significant.

18 Chapter Six: It was also written
19 ^a that the Son of Love became/man, and showed men how
20 to live, then died. Legend had it that the Son of
21 Love came back from the dead and disappeared into
22 a crowd. In some parts of the western world, the
23 believers of this legend spread a very influential
24 form of the message, "Man is Significant".

25 Chapter Seven: For many years this
26 state of affairs existed, but man became restless.
27 Was it so, was man a creation of Love? Why should
28 it simply be called a rumor? Had anyone used
29 this reason, ~~it~~ ^{was} a special activity of man that
30 had proved to be successful in understanding matter?

1 To find out if the rumor was true, if the rumor actually
2 corresponds to what really was, a thorough investigation
3 began and it lasted many years.

4 Chapter Eight: After an era of
5 investigation, man came to certain conclusions.
6 One, the rumors were clearly false. Reason found no
7 evidence to verify the God theory. God, they said,
8 was the direct result of wishful thinking, a figment
9 of the imagination which in itself was an early
10 abberation of primitive man, now happily under
11 control by reason. And if the rumor of God was
12 false, so surely was the complex rumor about His Son.

13 Man was not so mysterious, a higher
14 being which was significant; he was, on the contrary,
15 of no importance at all. Simply a complex product
16 of cause and effect, a meaningless piece of matter
17 on a larger but equally meaningless piece of matter
18 called Earth. He had emerged from (primeveal) slime
19 and was neither more nor less than that.

20 Chapter Nine: At first, nothing
21 much changed, but a few years passed and a few
22 perceptive men began to notice a difference. Music
23 didn't sound the same, painting didn't look the
24 same, and books didn't read in the same way. Some
25 people started to complain. But the Artists,
26 always very honest, simply said you are interpreting
27 reality, and if reality is meaningless, then we
28 are to imitate that meaninglessness. You must not
29
30

1 give yourselves (heirs), you are nothing, you are just
2 a conscious bit of protoplasm condemned to death
3 on this planet. At that time, the critical
4 group stopped as though to say, "How beautiful", because
5 everyone knew it didn't mean anything, but it had
6 been around for so long so why not use it anyway?

7 Chapter Ten: Then too, a few perceptive
8 men noticed changes in the way men and women behaved.
9 Once they had loved each other and their love was
10 thought to be a reflection of the love that was God.
11 But now there was just sex. The liaisons of the
12 moment and the families began to die as families and
13 children were left to the whim of the (courts). And
14 men called these liaisons love, but they knew the
15 word didn't mean anything.

16 Chapter Eleven: All sorts of startling
17 consequences followed. Some men said that if man is
18 only a machine cut out from the vast mechanism of
19 nature, why not treat him accordingly? So the
20 manipulators set to work and he was a man, just like
21 other objects of nature, and behold there evolved a
22 very efficient system called Utopia and the occupants
23 were called necrophiles, of course. And this was
24 nothing new, for the manipulators had picked up their
25 model from the ants, a very natural group of beings
26 who, years previously, had maintained a perfect state
27 of affairs.

28 Another group of men revised Utopia.
29 They said that despite all that reason has proved,
30

1 we will continue to believe that our longings and
2 aspirations are meaningful. So they tried to forget
3 their despair, a feeling that man began to experience
4 when he wanted to cope and did both when it was
5 hopeless by taking chemicals and behaving like
6 animals who were living only for each successive
7 moment and trying hard to make each moment pleasurable.
8 Most of them got tired of playing these games after
9 a while and disposed of themselves in various ways.
10 Some went to death, some went to Psychedelia, a
11 beautiful country with a synthetic landscape, some
12 went to Nirvana and some went even to Utopia. Nonsense
13 was worshipped instead of sense. They called it
14 "absurd".

15 Reason was abandoned because, you see,
16 it could not really give answers to big questions
17 after all. In its place came unreason. They called
18 it "irrationality" and morality was abandoned because
19 its peculiar ability to distinguish between the good
20 and the bad was simply regarded as a mere matter of taste
21 or of choice. The good and the bad had been popular
22 but that was when the rumors were right. The good
23 was God's character and the bad was disobedience or
24 revolt against the good. But the good and the bad
25 were part of reason and God, and now there is no
26 (bond to) tragedy, only misery.

27 Chapter Twelve: So man ceased to be
28 man, a rational or moral creature, but one transcended
29 pleasure and nature. Instead, he became a meaningless
30 machine like piece of matter. Even manipulators

1 who controlled Utopia ceased to be man in the old
2 sense of the world. After denying their (God), for so
3 long they finally lost it and so became the most
4 terrifying animal on the face of the earth.

5 As you can see, Chapter 13 is a blank
6 page.

7 MR. GUREVICH: The old rumor still
8 persists found in outlying regions in small states
9 of Utopia, that love is. Some say that Man is, but
10 these are the ones who say that no, Man never really
11 died, that even the ancients are alive, some
12 well, some not, and living in other worlds. Such
13 rumors are being suppressed wherever they are found.

14 In conclusion, we wish to say thank
15 you for listening and if you have understood what
16 we have said you will know that all is nonsense.

17 Thank you.

18 THE CHAIRMAN: Thank you, and I declare
19 this hearing closed.

20 Thank you all for your assistance
21 today.

22
23 --- Upon adjourning at 6:05 p.m.
24
25
26
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30

